

Health and Quality of Life Performance Measures: Seniors and People with Disabilities

Acronym	Performance Measure	Further Description	Specification Source	Data Source
Access/Utilization of Care				
SAAP	Access to Members Assigned PCP	Percentage of members who had an ambulatory or preventive care visit with the members assigned PCP during the measurement year. Exclude LTC population.	State modified HEDIS	Administrative
AMB	Ambulatory Care	Two Rates Reported per 1,000 member months: <ul style="list-style-type: none"> • Outpatient visits • Emergency Department visits that don't result in an inpatient stay. 	HEDIS®	Administrative
IAPE	Ambulatory Care Follow-up with a Provider within 14 Days of Emergency Department (ED) Visit	Follow-up with any Provider within 14 days following Emergency Department visit. Exclude ED visits with a principal diagnosis of mental health or chemical dependency.	Illinois	Administrative
IPU	Inpatient Utilization General Hospital/Acute Care	Utilization of acute inpatient care and services, per 1,000 Enrollees, in the following categories: Total inpatient, Surgery, Medicine and Maternity. Exclude discharges with a principal diagnosis of mental health or chemical dependency.	HEDIS®	Administrative
IAPI	Ambulatory Care Follow-up with a Provider within 14 Days of Inpatient Discharge	Ambulatory care follow-up visit within 14 days of having an inpatient hospital stay. Exclude discharges for deliveries (births) and discharges with a principal diagnosis of mental health or chemical dependency.	Illinois	Administrative
IIHR	Inpatient Hospital 30-Day Readmission Rates	Inpatient Hospital readmission for the same discharge diagnosis (to 3 rd digit) within 30 days after having an initial inpatient hospital stay. Two rates reported: <ul style="list-style-type: none"> • All stays except those with a primary behavioral health diagnoses • Stays with a primary behavioral health diagnosis only 	Illinois	Administrative
Preventive/Screening Services				
SCOL	Colorectal Cancer Screening	Percentage of members 50-75 years of age who had appropriate screening for colorectal cancer. Medicaid product line.	State modified HEDIS	Administrative /Hybrid
BCS	Breast Cancer Screening	Percentage of women 50-74 years of age who had a mammogram to screen for breast cancer during the measurement year or prior 18 months.	HEDIS® 2014 Adult Core	Administrative

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CCS	Cervical Cancer Screening	<p>The percentage of women 21–65 years of age who were screened for cervical cancer according to the evidence-based guidelines:</p> <ul style="list-style-type: none"> • Women age 24-65 who had a Pap test in the measurement year or the two years prior • Women age 35-65 who had a Pap test and an HPV test on the same date of service in the measurement year or the four years prior. 	HEDIS® 2014 Adult Core	Administrative /Hybrid
ABA	Adult BMI Assessment	Percentage of members 18-74 years of age who had an outpatient visit and who had their body mass index (BMI) documented during the measurement year or the year prior to the measurement year.	HEDIS® Adult Core	Administrative /Hybrid
SGSO	Glaucoma Screening	Percentage of members age 40 – 59, 60 – 64, 65 years and older and Total who received a glaucoma eye exam by an eye care professional for early identification of glaucomatous conditions. Medicaid product line.	State modified HEDIS	Administrative
Appropriate Care				
MCDC	Comprehensive Diabetes Care	Consists of three rates from HEDIS CDC and two rates developed by Illinois using the CDC Eligible Population.		Administrative /Hybrid
		<p>The percentage of members 18-75 years of age with diabetes (type 1 and type 2) who had the following:</p> <ul style="list-style-type: none"> • Hemoglobin A1c (HbA1c) testing • Medical attention for nephropathy • LDL-C screening 	HEDIS® Adult Core (HbA1c & LDL-C)	
		<ul style="list-style-type: none"> • Statin Therapy 80% of the time • ACE/ARB Therapy 80% of the time 	State modified HEDIS®	
PQI08	Congestive Heart Failure (CHF) Admission Rate	Number of discharges for CHF per 100,000 members age 18 and older.	AHRQ Adult Core	Administrative

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MCVC	Cardiovascular Conditions	Consists of three rates from Illinois ICAD and one rate from HEDIS PBH measure.		Administrative
	Coronary Artery Disease (ICAD)	The percentage of members with coronary artery disease (CAD) who had the following: <ul style="list-style-type: none"> • Cholesterol (LDL-C) testing • Statin Therapy 80% of the Time • ACE/ARB Therapy 80% of the Time 	Illinois	
	Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	The percentage of members 19 years of age and older who were hospitalized with AMI and who received persistent beta-blocker treatment for six months after discharge.	HEDIS®	
MCOP	Chronic Obstructive Pulmonary Disease	Consists of two HEDIS measures PCE and SPR.		Administrative
	Pharmacotherapy Management of COPD Exacerbation (PCE)	The percentage of COPD exacerbations for members 40 years of age and older who had an acute inpatient discharge or ED encounter and who were dispensed appropriate medications. Two rates reported: <ul style="list-style-type: none"> • Dispensed a systemic corticosteroid within 14 days of the event • Dispensed a bronchodilator within 30 days of the event 	HEDIS®	
	Use of Spirometry testing in the Assessment and Diagnosis of COPD (SPR)	The percentage of members 40 years old or older with a new diagnosis or newly active COPD, and who received appropriate Spirometry testing to confirm the diagnosis.		
MPM	Annual Monitoring for Patients on Persistent Medications	Percentage of members who received at least 180 ambulatory treatment days for ACE/ARB, Digoxin, Diuretics or Anticonvulsants and at least one therapeutic monitoring event for the agent during the measurement year.	HEDIS® Adult Core	Administrative
SDAE	Use of High-Risk Medications in the Elderly	Percentage of member's age ≥60 who received at least one drug to be avoided in the elderly and the percentage of members who received at least two different drugs to be avoided in the elderly. Medicaid product line.	State modified HEDIS	Administrative

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Long Term Care				
IUTI	Long Term Care – Urinary Tract Infection Admission Rate	LTC resident’s hospital utilization due to urinary tract infections.	Illinois	Administrative
IBPR	Long Term Care – Bacterial Pneumonia Admission Rate	LTC resident’s hospital utilization due to bacterial pneumonia.	Illinois	Administrative
IPPU	Long Term Care – Prevalence of Hospital Acquired Pressure Ulcers	LTC residents that have hospital-acquired stage II or greater pressure ulcers.	Illinois	Administrative
Behavioral Health				
AMM	Antidepressant Medication Management	Percentage of members diagnosed with a new episode of major depression, treated with antidepressant medication, and who remained on an antidepressant medication for: <i>Effective Acute Phase Treatment</i> - 84 days of continuous treatment during 114 day period following the Index Prescription Start Date. <i>Effective Continuation Phase Treatment</i> - 180 days of continuous treatment during 231 day period following the Index Prescription Start Date.	HEDIS® Adult Core	Administrative
SAA	Adherence to Antipsychotic Medications for Individuals With Schizophrenia	Percentage of member’s age 19 – 64 years with schizophrenia who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period.	HEDIS® Adult Core	Administrative
IMMP	Medication Monitoring for Patients with Psychotic Disorders	Percentage of members diagnosed with specified psychotic disorders in the prior year that remained on appropriate medication for 6-months and 12-months during the measurement year.	Illinois	Administrative
SSD	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	Percentage of members with schizophrenia or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening (HbA1c) during the measurement year.	HEDIS®	Administrative
IET	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	Members with a new episode of alcohol or other drug (AOD) dependence who received <i>Initiation of AOD Treatment</i> and <i>Engagement of AOD Treatment</i> .	HEDIS® Adult Core	Administrative
IFUP	Follow-up With a Provider Within 30 Days After an Initial Behavioral Health Diagnosis Measure on HOLD pending further development	Determines if a member had timely follow-up with a Practitioner following an initial behavioral health diagnosis.	Illinois	Administrative

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FUH	Follow-Up After Hospitalization for Mental Illness	Percentage of discharges for member's hospitalized for treatment of selected mental health disorders that had an outpatient visit, an intensive outpatient encounter or partial hospitalization with a mental health practitioner. Two rates reported: <ul style="list-style-type: none"> • Follow-up within 7 days of discharge • Follow-up within 30 days of discharge 	HEDIS® Adult Core	Administrative
MPT	Mental Health Utilization	Percentage of members receiving the following mental health services during the measurement year, per 1,000 member months: Any service, Inpatient, Outpatient or ED, and Intensive outpatient or partial hospitalization.	HEDIS®	Administrative
IBHR	Behavioral Health Risk Assessment and Follow-up Measure on HOLD pending further development	Percentage of new members who completed a behavioral health assessment (BHRA) within 60 days of enrollment. Percentage with a positive finding on BHRA who receive follow-up with a MH provider within 30 days.	Illinois	MCO Administrative Case Mgt Review
Member Movement				
IMWS	Movement of Members between Community, Waiver and LTC Services	Member's location in community, waiver and long-term care on January 1 and the same member's location on December 31 of the measurement year. (Exclude LTC stays ≤90 days)	Illinois	Administrative
Surveys				
SCPA	CAHPS – Consumer Assessment of Health Plan Survey	CAHPS, Adult Version <u>as approved by HFS</u> . Provides information on the experiences of members with the organization and gives a general indication of how well the organization meets member's expectations. The following questions must be added for the waiver populations only. I receive the services I need when I need them? <input type="checkbox"/> Yes <input type="checkbox"/> No I received all the services listed in my plan of care? <input type="checkbox"/> Yes <input type="checkbox"/> No I am treated well by my direct support staff? <input type="checkbox"/> Yes <input type="checkbox"/> No	State modified HEDIS Adult Core	CAHPS Survey with Supplemental Waiver questions
SFA	Flu Shots for Adults Ages 18 and Older	Percentage of members 18 and older who received an influenza vaccination between July 1 of the measurement year and the date when the CAHPS 5.0H adult survey was completed.	State modified HEDIS 2014 Adult Core	MCO CAHPS Survey

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SFRM	Fall Risk Management	<p><i>Discussing Fall Risk:</i> The percentage of members ≥60 years of age who in the past 6 months had balance or walking problems or a fall who were seen by a practitioner and discussed fall risk.</p> <p><i>Managing Fall Risk</i> Percentage of members ≥60 years of age who in the past 6 months had a fall or balance or walking problems who were seen by a practitioner and received fall risk intervention from their current practitioner. Medicaid product line. Add questions to CAHPS.</p> <p>A fall is when your body goes to the ground without being pushed. In the past 6 months, did you talk with your doctor or other health provider about falling or problems with balance or walking?</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>No <input type="checkbox"/>I had no visits in the past 6 months</p> <p>Did you fall in the past 6 months?</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>In the past 6 months, have you had a problem with balance or walking?</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>Has your doctor or other health provider done anything to help prevent falls or treat problems with balance or walking?</p> <p>Some things they might do include:</p> <ul style="list-style-type: none"> ▪ Suggest that you use a cane or walker. ▪ Check your blood pressure lying or standing. ▪ Suggest that you do an exercise or physical therapy program. ▪ Suggest a vision or hearing testing. <p><input type="checkbox"/>Yes <input type="checkbox"/>No <input type="checkbox"/>I had no visits in the past 6 months</p>	State modified HEDIS	CAHPS Survey Supplemental HOS questions

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SMUI	Management of Urinary Incontinence in Older Adults	<p><i>Discussing:</i> Members who reported having a problem with urine leakage in the past six months and who discussed their urine leakage problem with their current practitioner.</p> <p><i>Receiving Treatment:</i> Members who reported having a urine leakage problem in the past six months and who received treatment for their current urine leakage problem. Medicaid product line. Add questions to CAHPS.</p> <p>Many people experience problems with urinary incontinence, the leakage of urine. In the past 6 months, have you accidentally leaked urine? <input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>How much of a problem, if any, was the urine leakage for you? <input type="checkbox"/>A big problem <input type="checkbox"/>A small problem <input type="checkbox"/>Not a problem</p> <p>Have you talked with your current doctor or other health provider about your urine leakage problem? <input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>There are many ways to treat urinary incontinence including bladder training, exercises, medication and surgery. Have you received these or any other treatments for your current urine leakage problem? <input type="checkbox"/>Yes <input type="checkbox"/>No</p>	State modified HEDIS	CAHPS Survey Supplemental HOS questions
SPA0	Physical Activity in Older Adults	<p><i>Discussing Physical Activity:</i> Members who had a doctor's visit in the past 6 months and who spoke with a doctor or other health provider about their level of exercise or physical activity.</p> <p><i>Advising Physical Activity:</i> Members who had a doctor's visit in the past 6 months and who received advice to start, increase or maintain their level exercise or physical activity. Medicaid product line. Add questions to CAHPS.</p> <p>In the past 6 months, did you talk with a doctor or other health provider about your level of exercise or physical activity? For example, a doctor or other health provider may ask if you exercise regularly or take part in physical exercise. <input type="checkbox"/>Yes <input type="checkbox"/>No <input type="checkbox"/>I had no visits in the past 6 months</p> <p>In the past 6 months, did a doctor or other health provider advise you to start, increase or maintain your level of exercise or physical activity? For example, in order to improve your health, your doctor or other health provider may advise you to start taking the stairs, increase walking from 10 to 20 minutes every day or to maintain your current exercise program. <input type="checkbox"/>Yes <input type="checkbox"/>No</p>	State modified HEDIS	CAHPS Survey Supplemental HOS questions

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Acronym Style	Measure Source
Three letter	HEDIS® measure
“S” followed by a HEDIS acronym	State modified HEDIS® measure
Four letter starts with “I”	Illinois defined and developed
Four letter starts with “M”	A combination of HEDIS®, State Modified and or Illinois measures to form a single measure
Other	See Specification Source information

Count	Type of Measure
13	HEDIS®
9	State modified HEDIS®
10	Illinois defined and developed
2	Combined mixed (1 HEDIS®/State Modified) (1 Illinois/HEDIS®)
1	Other (AHRQ)
35	Total