Measures Suggested for Review at the 2023 Core Set Annual Review, by Domain

Suggested for Removal or Addition	Domain and Measure Name	Measure Steward	NQF #	Data Collection Method
Primary Care Access a	nd Preventive Care			
Removal	Flu Vaccinations for Adults Ages 18-64 (FVA-AD)	NCQA	0039ª	Survey
Removal	Screening for Depression and Follow-Up Plan: Ages 12 to 17 (CDF-CH) and Age 18 and Older (CDF-AD)	CMS	0418/0418eª	Administrative or EHR
Addition	Adult Immunization Status	NCQA	3620	ECDS ^b
Addition	Depression Screening and Follow-Up for Adolescents and Adults	NCQA	NA	ECDS⁵
Addition	Lead Screening in Children	NCQA	NA	Administrative or hybrid
Addition	Adults' Access to Preventive/Ambulatory Health Services	NCQA	NA	Administrative
Care of Acute and Chro	nic Conditions			
Removal	HIV Viral Load Suppression (HVL-AD)	HRSA	2082/3210e	Administrative or EHR
Addition	Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (Ages 3 Months–17 Years) (Note: This measure was added to the 2022 Adult Core Set; this measure is being suggested for addition to the 2023 Child Core Set.)	NCQA	0058	Administrative
Addition	Eye Exam for Patients With Diabetes (Note: This measure was part of Comprehensive Diabetes Care and is now a standalone measure.)	NCQA	0055	Administrative, hybrid, EHR
Addition	Blood Pressure Control for Patients With Diabetes (Note: This measure was part of Comprehensive Diabetes Care and is now a standalone measure.)	NCQA	0061	Administrative, hybrid, EHR
Addition	Kidney Health Evaluation for Patients With Diabetes (Note: This measure was part of Comprehensive Diabetes Care and is now a standalone measure that replaces Medical Attention for Nephropathy.)	NCQA	NA	Administrative
Addition	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	CMS	NA	EHR or clinical registry
Addition Note: This measure will not be discussed because it is already in the Adult Core Set.	Hemoglobin A1c Control for Patients With Diabetes (Note: This measure incorporates Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%), which is already in the Adult Core Set.)	NCQA	0575/0059	Administrative, hybrid, EHR
Behavioral Health Care				
Removal	Medical Assistance with Smoking and Tobacco Use Cessation (MSC-AD)	NCQA	0027ª	Survey
Removal	Diabetes Care for People With Serious Mental Illness: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (HPCMI-AD)	NCQA	2607	Administrative or hybrid
Removal	Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)	PQA	2940	Administrative
Removal	Concurrent Use of Opioids and Benzodiazepines (COB-AD)	PQA	3389	Administrative

Measures Suggested for Review (continued)

Suggested for Removal or Addition	Domain and Measure Name	Measure Steward	NQF #	Data Collection Method		
Long-Term Services and Supports						
Addition	Long-Term Services and Supports: Shared Care Plan with Primary Care Physician	NCQA	NA	Case management record review		
Addition	Long-Term Services and Supports: Successful Transition After Long-Term Institutional Stay	CMS	NA	Administrative		
Addition	National Core Indicators for Aging and Disabilities (NCI-AD) Adult Consumer Survey	ADvancing States and HSRI	NA	Survey		
Addition Note: This measure will not be discussed because the measure was recommended by the Workgroup previously and CMCS deferred a decision.	Long-Term Services and Supports: Comprehensive Care Plan and Update	NCQA	NA	Case management record review		
Addition Note: This measure will not be discussed because it does not meet minimum technical feasibility criteria.	Long-Term Services and Supports Expenditures on Home & Community-Based Services	CMS	NA	Administrative		
Other						
Addition Note: These measures will not be discussed because they do not meet minimum technical feasibility criteria.	 Drivers of Health Screening Rate and Screen Positive Rate 1. Drivers of Health Screening Rate for Medicaid Managed Care Organizations and Provider- Led Accountable Entities (Child and Adult) 2. Drivers of Health Screening Rate for Providers (Child and Adult) 3. Drivers of Health Screen Positive Rate for Medicaid Managed Care Organizations and Provider-Led Accountable Entities (Child and Adult) 4. Drivers of Health Screen Positive Rate for Providers (Child and Adult) 	Manatt	NA	Other		

Notes: Data collection methods are current as of March 2022. The methods may change as measures undergo specification updates and maintenance. Measures specified for administrative data collection may use code sets that may not be available for state-level reporting, such as LOINC, SNOMED, or CPT-II codes. More information is available in the measure specifications.

^a Measure is no longer endorsed.

^b The ECDS data collection method includes data from administrative claims, electronic health records, case management systems, and health information exchanges/clinical registries. More information about ECDS is available at https://www.ncqa.org/hedis/the-future-of-hedis/hedis-electronic-clinical-data-system-ecds-reporting/.

CHIP = Children's Health Insurance Program; CMCS = Center for Medicaid and CHIP Services; CMS = Centers for Medicare & Medicaid Services; ECDS = Electronic Clinical Data System; EHR = Electronic Health Record; HRSA = Health Resources & Services Administration; HSRI = Human Services Research Institute; NA = Measure is not NQF endorsed; NCQA = National Committee for Quality Assurance; NQF = National Quality Forum; PQA = Pharmacy Quality Alliance.