SUMMARY OF UPDATES TO THE HEALTH HOME CORE SET MEASURES
TECHNICAL SPECIFICATIONS AND RESOURCE MANUAL
APRIL 2022

Overall Changes

- Updated reporting year to FFY 2022, and data collection timeframe to 2021.
- Updated specifications, value set codes, copyright, and table source information to HEDIS MY 2021 Vol. 2 for all HEDIS measures.
- Updated specifications, value set codes, and copyright information to correspond to calendar year 2021 for non-HEDIS measures.
- Added specifications for two new measures:
  - Measure COL-HH: Colorectal Cancer Screening
  - Measure FUM-HH: Follow-Up After Emergency Department Visit for Mental Illness

I. The Core Set of Health Care Quality Measures for Medicaid Health Home Programs

- Inserted information about updates to the 2022 Health Home Core Set.

II. Data Collection and Reporting of the Health Home Core Set

- Clarified that enrollees in hospice should be removed as states determine measure’s eligible population. For hybrid measures, states should remove enrollees in hospice prior to drawing the sample.
- Added guidance that states should exclude enrollees who die during the measurement year if the state can identify these enrollees. The state should attempt to remove these enrollees as it determines the eligible population and prior to drawing the sample for hybrid measures. This guidance applies to the following HEDIS measures in the Health Home Core Set: CBP-HH, COL-HH, FUA-HH, FUH-HH, FUM-HH, and IET-HH.

III. Technical Specifications for the Health Home Core Set Measures

Measure CBP-HH: Controlling High Blood Pressure

- Updated the hybrid specification to indicate that sample size reduction is allowed using the current year’s administrative rate (FFY 2022 Core Set reporting) or the prior year’s rate (FFY 2021 Core Set reporting).

Measure CDF-HH: Screening for Depression and Follow-Up Plan

- Added Guidance for Reporting:
  - The intent of the measure is to screen for depression in enrollees who have never had a diagnosis of depression or bipolar disorder prior to the eligible encounter used to evaluate the numerator. Enrollees who have ever been diagnosed with depression or bipolar disorder will be excluded from the measure.
- The measure assesses the most recent depression screening completed either during the eligible encounter or within the 14 days prior to that encounter. Therefore, a clinician would not be able to complete another screening at the time of the encounter to count toward a follow-up, because that would serve as the most recent depression screening. In order to satisfy the follow-up requirement for an enrollee screening positively, the eligible clinician would need to provide one of the specified follow-up actions, which does not include use of a standardized depression screening tool.

- Should an enrollee screen positive for depression, a clinician could opt to complete a suicide risk assessment when appropriate and based on individual enrollee characteristics. However, for the purposes of this measure, a suicide risk assessment will not qualify as a follow-up plan.

  • Updated Screening definition to note that the depression screening can be either a clinical or diagnostic tool, and that the depression screening must be reviewed and addressed in the office of the provider on the date of the encounter.
  • Updated Follow-up Plan definition to remove additional evaluation for depression and suicide risk assessment as requirements for documenting follow-up for a positive depression screening.
  • Updated the exclusion language to clarify that the measure excludes enrollees who have been diagnosed with depression or bipolar disorder.
  • Updated codes to identify outpatient visits.

**Measure OUD-HH: Use of Pharmacotherapy for Opioid Use Disorder**

  • Updated value set directory including:
    - Updated codes for approved pharmacotherapy for Opioid Use Disorder (OUD).

**Measure PCR-HH: Plan All-Cause Readmissions**

  • Updated the Health Home Population definition to note that enrollees must be ages 18 to 64 as of the earliest Index Discharge Date.
  • Updated Reporting: Count of Enrollees in Health Home Population to note that the state should determine the enrollee’s age as of the earliest Index Discharge Date.
  • Updated Reporting: Number of Outliers to note that the state should determine the enrollee’s age as of the earliest Index Discharge Date.