FAMILY HEALTH OUTCOMES PROJECT
HEDIS 3.0® REPORTING AND TESTING SET MEASURES, BY DOMAIN


I. Effectiveness of Care

Reporting Set Measures

- Advising smokers to quit (in Member Satisfaction Survey)
- Beta blocker treatment after a heart attack
- The health of seniors
- Eye exams for people with diabetes
- Flu shots for older adults
- Cervical cancer screening
- Breast cancer screening
- Childhood immunization status
- Adolescent immunization status
- Treating children's ear infections
- Prenatal care in the first trimester
- Low birth-weight babies
- Check-ups after delivery
- Follow up after hospitalization for mental illness

Testing Set Measures

- Number of people in the plan who smoke
- Smokers who quit
- Flu shots for high-risk adults
- Cholesterol management of patients hospitalized after coronary artery disease
- Aspirin treatment after a heart attack
- Outpatient care of patients hospitalized for heart failure
- Controlling high blood pressure
- Prevention of stroke in people with atrial fibrillation
- Colorectal cancer screening
- Follow-up after an abnormal pap smear
- Follow-up after an abnormal mammogram
- Stage at which breast cancer was detected
- Assessment of how breast cancer therapy affects the patient's ability to function
- Continuity of care for substance abuse patients
- Substance counseling for adolescents
- Availability of medication management and psychotherapy for patients with schizophrenia
Patient satisfaction with mental health care
Family visits for children 12 years of age or younger
Failure of substance abuse treatment
Screening for chemical dependency
Appropriate use of psychotherapeutic medications
Continuation of depression treatment
Monitoring diabetes patients
Chlamydia screening
Prescription of antibiotics for the prevention of HIV-related pneumonia
Use of appropriate medications for people with asthma

II. Access/Availability of Care

Reporting Set Measures

Availability of primary care providers
Children's access to primary care providers
Availability of mental health/chemical dependency providers (phased in)
Annual dental visit
Availability of dentists
Adults' access to preventive/ambulatory health services
Initiation of prenatal care (phased in)
Availability of obstetrical/prenatal care providers (phased in)
Low birth-weight deliveries at facilities for high-risk deliveries and neonates
Availability of language interpretation services

Testing Set Measures

Problems with obtaining care

III. Satisfaction with the Experience of Care

Reporting Set

The Member Satisfaction Survey (numerous measures)
Survey descriptive information

Testing Set

Consumer Assessments of Health Plans Study (CAHPS)
Disenrollment survey
Satisfaction with breast cancer treatment

IV. Health Plan Stability

Reporting Set

Disenrollment
Provider turnover
Narrative information on rate trends, financial stability and insolvency protection
Indicators of financial stability
Years in business/total membership

V. Use of Services

Reporting Set

Well-child visits in the first 15 months of life (phased in)
Well-child visits in the third, fourth, fifth and sixth year of life (phased in)
Adolescent well-care visit (phased in)
Frequency of selected procedures
Inpatient utilization -- non-acute care
Inpatient utilization -- general hospital/acute care
Ambulatory care
Cesarean section and vaginal birth after cesarean rate (VBAC-rate)
Discharge and average length of stay for females in maternity care
Births and average length of stay, newborns
Frequency of ongoing prenatal care
Mental health utilization -- percentage of members receiving inpatient day/night and ambulatory services
Readmission for specified mental health disorders
Chemical dependency utilization -- inpatient discharges and average LOS
Chemical dependency utilization -- percentage of members receiving inpatient, day/night care and ambulatory services
Mental health utilization - inpatient discharges and average LOS
Readmission for chemical dependency
Outpatient drug utilization

Testing Set

Use of Behavioral Services

VI. Cost of Care

Reporting Set

High-occurrence/high-cost DRGs
Rate trends

Testing Set

Health plan costs per member per month

VII. Informed Health Care Choices
Reporting Set

Language translation services
New member orientation/education

Testing Set

Counseling women about hormone replacement therapy

VIII. Health Plan Descriptive Information

Reporting Set

Board certification/residency completion
Provider compensation
Physicians under capitation
Recredentialing
Pediatric mental health network
Chemical dependency services
Arrangements with public health, educational and social service organizations
Weeks of pregnancy at time of enrollment
Family planning services
Preventive care and health promotion
Quality assessment and improvement
Case management
Utilization management
Risk management
Diversity of Medicaid membership
Unduplicated Count of Medicaid members
Enrollment by payer (member years/months)
Total Enrollment

Note: plans are not required to report measures that are being phased in (shown in italics) for Reporting Year 1996, except for the Medicaid populations to which these measures originally applied. These measures will apply to all populations and will be required for reporting in Reporting Year 1997.