Effectiveness of Care

## Aspirin Use and Discussion (ASP)

## Summary of Changes to HEDIS 2013

* Question numbers have been updated for consistency with the 5.0H version of the adult CAHPS survey.

Description

The following components of this measure assess different facets of managing aspirin use for the primary prevention of cardiovascular disease.

|  |  |
| --- | --- |
| **Aspirin Use** | A rolling average represents the percentage of members who are currently taking aspirin. A single rate is reported, for which the denominator includes:   * Women 56–79 years of age with at least two risk factors for cardiovascular disease. * Men 46–65 years of age with at least one risk factor for cardiovascular disease. * Men 66–79 years of age, regardless of risk factors. |
| **Discussing Aspirin Risks and Benefits** | A rolling average represents the percentage of members who discussed the risks and benefits of using aspirin with a doctor or other health provider. A single rate is reported, for which the denominator includes:   * Women 56–79 years of age. * Men 46–79 years of age. |

Definitions

|  |  |
| --- | --- |
| Cardiovascular disease risk factor | Cardiovascular disease risk factors include:   * Current smoker or tobacco user. * High cholesterol. * High blood pressure. * Parent or sibling who had a heart attack before 60 years of age. |
| Cardiovascular disease | Because the measure assesses aspirin use for the primary prevention of cardiovascular disease, members with cardiovascular disease are excluded. This includes members with a history of:   * Heart attack. * Angina or coronary heart disease. * Stroke. * Diabetes or high blood sugar. |

Eligible Population

|  |  |
| --- | --- |
| Product lines | Commercial, Medicaid (report each product line separately). |
| Ages | Men 46–79 and women 56–79 as of December 31 of the measurement year. |
| Continuous enrollment | *Commercial:* The measurement year.  *Medicaid:* The last six months of the measurement year. |
| Allowable gap | No more than one gap in enrollment of up to 45 days during the measurement year. To determine continuous enrollment for a Medicaid beneficiary for whom enrollment is verified monthly, the member may not have more than a 1-month gap in coverage (a member whose coverage lapses for 2 months [60 days] is not considered continuously enrolled). |
| Current enrollment | Currently enrolled at the time the survey is completed. |

Protocol and Survey Instrument

|  |  |
| --- | --- |
| Commercial, Medicaid | Collected annually as part of the CAHPS Health Plan Survey 5.0H, Adult Version using rolling average methodology. |

Gender-Dependent Age Band Eligibility Flags

The health plan calculates the member’s age as of December 31 of the measurement year for each member in the CAHPS 5.0H Adult Survey sample frame data file.

|  |  |
| --- | --- |
| Data Element | Value Labels |
| Member age as of December 31 of the measurement year | Numeric, 2-digit variable; Valid values are 18–80.  For members age 80 years and older, code “80.” For example, a member who is 89 years of age as of December 31 of the measurement year will be coded “80.” |

Prior to results calculation, NCQA uses the member gender and member age as of December 31 of the measurement year to assign a Gender-Dependent Age Band Eligibility Flag, as follows.

|  |
| --- |
| Gender-Dependent Age Band Eligibility Flags |
| **1 =** Female age 55 or younger as of December 31 of the measurement year |
| **2 =** Female age 56–79 as of December 31 of the measurement year |
| **3 =** Female age 80 or older as of December 31 of the measurement year |
| **4 =** Male age 45 or younger as of December 31 of the measurement year |
| **5 =** Male age 46–65 as of December 31 of the measurement year |
| **6 =** Male age 66–79 as of December 31 of the measurement year |
| **7 =** Male age 80 or older as of December 31 of the measurement year |

The Gender-Dependent Age Band Eligibility Flag identifies members eligible for the *Aspirin Use and Discussion* measure rates. The use of an eligibility flag protects member confidentiality (using the date of birth could result in a breach of confidentiality).

Questions Included in the Measure

### Table ASP: Aspirin Use and Discussion

|  |  |  |  |
| --- | --- | --- | --- |
| Commercial | Medicaid | Question | Response Choices |
| **Q46** | **Q38** | Do you now smoke cigarettes or use tobacco every day, some days, or not at all? | Every day  Some days  Not at all  Don’t know |
| **Q50** | **Q42** | Do you take aspirin daily or every other day? | Yes  No  Don’t know |
| **Q51** | **Q43** | Do you have a health problem or take medication that makes taking aspirin unsafe for you? | Yes  No  Don’t know |
| **Q52** | **Q44** | Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke? | Yes  No |
| **Q53** | **Q45** | Are you aware that you have any of the following conditions? Check all that apply. | High cholesterol  High blood pressure  Parent or sibling with heart attack before the age of 60 |
| **Q54** | **Q46** | Has a doctor ever told you that you have any of the following conditions? Check all that apply. | A heart attack  Angina or coronary heart disease  A stroke  Any kind of diabetes or high blood sugar |

Calculation of Aspirin Use and Discussion

Rolling averages are calculated using the formula below:

Rate = (Year 1 Numerator + Year 2 Numerator) / (Year 1 Denominator + Year 2 Denominator).

* If the denominator is less than 100, NCQA assigns a measure result of *NA.*
* If the denominator is 100 or more, NCQA calculates a rate.

If the health plan did not report results for the current year (Year 2) NCQA assigns a measure result of *Not Reportable (NR)*. If the health plan did not report results in the prior year (Year 1) but reports results for the current year and achieves a denominator of 100 or more, NCQA calculates a rate; if the denominator is less than 100 NCQA assigns a measure result of *NA*.

|  |  |
| --- | --- |
| Changes in submission entity | If a health plan reports HMO and POS products separately in the prior year and reports HMO/POS combined in the current year, Year 1 numerators and denominators are created by combining data from the separate HMO and POS results. The combined Year 1 numerators and denominators are used for the rolling average calculations.  Alternatively, if a health plan reports HMO/POS combined in the prior year and reports HMO and POS separately in the current year, the reporting entity is considered changed and prior year data are not used for any rolling average calculations. |

Question numbers reference the adult survey for the commercial product line. The rate for the Medicaid product line is calculated by substituting the corresponding questions and response options.

Aspirin Use

|  |  |
| --- | --- |
| Denominator | The number of members who responded to the survey and indicated that they did not have a health problem or take medication that makes taking aspirin unsafe, did not have an exclusion and who are:   * Women 56–79 with at least two risk factors for cardiovascular disease. * Men 46–65 with at least one risk factor for cardiovascular disease. * Men 66–79. |
| *Eligible gender-dependent age bands* | Only members with Gender-Dependent Age Band Eligibility Flags of 2, 5 and 6 are included in the denominator.   * Members with a **Gender-Dependent Age Band Eligibility Flag = 2** must have at least two cardiovascular disease risk factors. * Members with a **Gender-Dependent Age Band Eligibility Flag = 5** must have at least one cardiovascular disease risk factor. * Members with a **Gender-Dependent Age Band Eligibility Flag = 6** are included, regardless of the number of cardiovascular disease risk factors. |
| *Summing cardiovascular disease risk factors* | Each response choice below indicates a cardiovascular disease risk factor. Sum the responses by member to calculate the total number of risk factors for that member.  *Q46* = “Every day” or “Some days.”  *Q53* = “High cholesterol.”  *Q53* = “High blood pressure.”  *Q53* = “Parent or sibling with heart attack before the age of 60.” |
| *Exclusions* | Any response to Q54 indicates a cardiovascular disease exclusion. Exclude any member who selected *any* response choice for Q54: “A heart attack” or “Angina or coronary heart disease” or “A stroke” or “Any kind of diabetes or high blood sugar.” |
| *Aspirin use questions* | Response choices must be as follows to be included in the denominator:  *Q50* = “Yes” or “No.”  *Q51* = “No.” |
| Numerator | The number of members in the denominator who indicated that they currently take aspirin daily or every other day.  Member response choice must be as follows to be included in the numerator:  *Q50* = “Yes.” |

Discussing Aspirin Risks and Benefits

|  |  |
| --- | --- |
| Denominator | The number of respondents who are women 56–79 and men 46–79 years of age. |
| *Eligible gender-dependent age bands* | Only members with Gender-Dependent Age Band Eligibility Flags of 2, 5 and 6 are included in the denominator. |
| *Exclusions* | Any response to Q54 indicates a cardiovascular disease exclusion. Exclude any member who selected *any* response choice for Q54: “A heart attack” or “Angina or coronary heart disease” or “A stroke” or “Any kind of diabetes or high blood sugar.” |
| *Aspirin discussion question* | Response choices must be as follows to be included in the denominator:  *Q52* = “Yes” or “No.” |
| Numerator | The number of members in the denominator who indicated that their doctor or other provider discussed the risks and benefits of aspirin use to prevent heart attack or stroke.  Member response choice *must* be as follows to be included in the numerator:  *Q52* = “Yes.” |

## Medical Assistance With Smoking and Tobacco Use Cessation (MSC)

## Summary of Changes to HEDIS 2013

* Question numbers have been updated for consistency with the 5.0H version of the adult CAHPS survey.

Description

The following components of this measure assess different facets of providing medical assistance with smoking and tobacco use cessation:

|  |  |
| --- | --- |
| Advising Smokers and Tobacco Users to Quit | A rolling average represents the percentage of members 18 years of age and older who were current smokers or tobacco users and who received advice to quit during the measurement year. |
| Discussing Cessation Medications | A rolling average represents the percentage of members 18 years of age and older who were current smokers or tobacco users and who discussed or were recommended cessation medications during the measurement year. |
| Discussing Cessation Strategies | A rolling average represents the percentage of members 18 years of age and older who were current smokers or tobacco users and who discussed or were provided cessation methods or strategies during the measurement year. |

Eligible Population

|  |  |
| --- | --- |
| Product lines | Commercial, Medicaid, Medicare (report each product line separately). |
| Ages | 18 years and older as of December 31 of the measurement year. |
| Continuous enrollment | *Commercial:* The measurement year.  *Medicaid:* The last six months of the measurement year.  *Medicare:* Six months prior to the CMS administration of the survey. |
| Allowable gap | No more than one gap in enrollment of up to 45 days during the measurement year. To determine continuous enrollment for a Medicaid beneficiary for whom enrollment is verified monthly, the member may not have more than a 1-month gap in coverage (a member whose coverage lapses for 2 months [60 days] is not considered continuously enrolled). |
| Current enrollment | Currently enrolled at the time the survey is completed. |

Protocol and Survey Instrument

|  |  |
| --- | --- |
| Commercial, Medicaid | Collected annually as part of the CAHPS Health Plan Survey 5.0H, Adult Version using rolling average methodology. |
| Medicare | Collected by CMS using the Medicare CAHPS Survey. Only the *Advising Smokers and Tobacco Users to Quit* rate is collected for the Medicare product line. |

Questions Included in the Measure

### Table MSC-1: Medical Assistance With Smoking and Tobacco Use Cessation— Commercial Product Line

|  |  |  |  |
| --- | --- | --- | --- |
|  | Question | Response Choices | |
| **Q46** | Do you now smoke cigarettes or use tobacco every day, some days, or not at all? | Every day  Some days  Not at all  Don’t know | 🡺If Not at all, Go to Question 50  🡺If Don’t know, Go to Question 50 |
| **Q47** | In the last 12 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? | Never  Sometimes  Usually  Always | |
| **Q48** | In the last 12 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication. | Never  Sometimes  Usually  Always | |
| **Q49** | In the last 12 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program. | Never  Some\times  Usually  Always | |

### Table MSC-2: Medical Assistance With Smoking and Tobacco Use Cessation— Medicaid Product Line

|  |  |  |
| --- | --- | --- |
|  | Question | Response Choices |
| **Q38** | Do you now smoke cigarettes or use tobacco every day, some days, or not at all? | Every day  Some days  Not at all 🡺If Not at all, Go to Question 42  Don’t know 🡺If Don’t know, Go to Question 42 |
| **Q39** | In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? | Never  Sometimes  Usually  Always |
| **Q40** | In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication. | Never  Sometimes  Usually  Always |
| **Q41** | In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program. | Never  Sometimes  Usually  Always |

### Table MSC-3: Medical Assistance With Smoking and Tobacco Use Cessation— Medicare Product Line

|  |  |  |
| --- | --- | --- |
|  | Question | Response Choices |
| **Q65** | Do you now smoke cigarettes or use tobacco every day, some days, or not at all? | Every day  Some days  Not at all 🡺If Not at all, Go to Question 67  Don’t know 🡺If Don’t know, Go to Question 67 |
| **Q66** | In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? | Never  Sometimes  Usually  Always  I had no visits in the last 6 months |

Calculation of Medical Assistance With Smoking and Tobacco Use Cessation

For the commercial and Medicaid product lines, rolling averages are calculated using the formula below.

Rate = (Year 1 Numerator + Year 2 Numerator) / (Year 1 Denominator + Year 2 Denominator)

* If the denominator is less than 100, NCQA assigns a measure result of *NA.*
* If the denominator is 100 or more, NCQA calculates a rate.

If the health plan did not report results for the current year (Year 2) NCQA assigns a measure result of *NR*.

If the health plan did not report results in the prior year (Year 1), but reports results for the current year and achieves a denominator of 100 or more, NCQA calculates a rate; if the denominator is less than 100, NCQA assigns a measure result of *NA*.

|  |  |
| --- | --- |
| Changes in submission entity | If a health plan reports HMO and POS products separately in the prior year and reports HMO/POS combined in the current year, Year 1 numerators and denominators are created by combining data from the separate HMO and POS results. The combined  Year 1 numerators and denominators are used for rolling average calculations.  Alternatively, if the health plan reports HMO/POS combined in the prior year and reports HMO and POS separately in the current year, the reporting entity is considered changed and prior year data are not used for rolling average calculations. |

Question numbers reference the adult survey for the commercial product line. The rate for the Medicaid product line is calculated by substituting the corresponding questions and response options.

Advising Smokers and Tobacco Users to Quit—Commercial and Medicaid Product Lines

|  |  |
| --- | --- |
| Denominator | The number of members who responded to the survey and indicated that they were current smokers or tobacco users. Member response choices *must* be as follows to be included in the denominator:  *Q46* = “Every day” or “Some days.”  *Q47* = “Never” or “Sometimes” or “Usually” or “Always.” |
| Numerator | The number of members in the denominator who indicated that they received advice to quit from a doctor or other health provider by answering “Sometimes” or “Usually” or “Always” to Q47. |

Advising Smokers and Tobacco Users to Quit—Medicare Product Line

|  |  |
| --- | --- |
| Denominator | The number of members who responded to the survey and indicated that they were current smokers or tobacco users and had one or more visits during the measurement year. Member response choices *must* be as follows to be included in the denominator:  *Q65* = “Every day” or “Some days.”  *Q66* = “Never” or “Sometimes” or “Usually” or “Always.”  **Note:** Medicare results for the Advising Smokers and Tobacco Users to Quit rate requires a minimum denominator of at least 30 responses. |
| Numerator | The number of members in the denominator who indicated that they received advice to quit from a doctor or other health provider by answering “Sometimes” or “Usually” or “Always” to Q66. |

Discussing Cessation Medications—Commercial and Medicaid Product Lines

|  |  |
| --- | --- |
| Denominator | The number of members who responded to the survey and indicated that they were current smokers or tobacco users. Member response choices *must* be as follows to be included in the denominator:  *Q46* = “Every day” or “Some days.”  *Q48* = “Never” or “Sometimes” or “Usually” or “Always.” |
| Numerator | The number of members in the denominator who indicated that their doctor or health provider recommended or discussed cessation medications by answering “Sometimes” or “Usually” or “Always” to Q48. |

Discussing Cessation Strategies—Commercial and Medicaid Product Lines

|  |  |
| --- | --- |
| Denominator | The number of members who responded to the survey and indicated that they were current smokers or tobacco users. Member response choices *must* follow one of the two paths to be included in the denominator:  *Q46* = “Every day” or “Some days.”  *Q49* = “Never” or “Sometimes” or “Usually” or “Always.” |
| Numerator | The number of members in the denominator who indicated that their doctor or health provider discussed or provided cessation methods and strategies by answering “Sometimes” or “Usually” or “Always” to Q49. |

Percentage of Current Smokers and Tobacco Users—Supplemental Calculation

This calculation is provided to support analysis of *Medical Assistance With Smoking and Tobacco Use Cessation* rates and provides additional context for *NA* results. A health plan with a small number of smokers or tobacco users may not be able to obtain a large enough denominator to achieve reportable rates (and may receive NA results).

The percentage of current smokers and tobacco users is calculated using data collected during the current reporting year only (not calculated as a rolling average).

|  |  |
| --- | --- |
| Denominator | The number of members who responded “Every day,” “Some days,” “Not at all” or “Don’t know” to the question “Do you now smoke cigarettes or use tobacco every day, some days, or not at all?” |
| Numerator | The number of members in the denominator who responded “Every day” or “Some days” to the question “Do you now smoke cigarettes or use tobacco every day, some days, or not at all?” |

## Flu Shots for Adults Ages 50–64 (FSA)

## Summary of Changes to HEDIS 2013

* Question numbers have been updated for consistency with the 5.0H version of the adult CAHPS survey.

Description

A rolling average represents the percentage of members 50–64 years of age who received an influenza vaccination between September 1 of the measurement year and the date when the CAHPS 5.0H adult survey was completed.

Eligible Population

|  |  |
| --- | --- |
| Product line | Commercial. |
| Ages | 50–64 years as of September 1 of the measurement year. |
| Continuous enrollment | The measurement year. |
| Allowable gap | No more than one gap in enrollment of up to 45 days during the measurement year. |
| Current enrollment | Currently enrolled at the time the survey is completed. |

Protocol and Survey Instrument

Collected annually as part of the CAHPS Health Plan Survey 5.0H, Adult Version, using rolling average methodology.

Flu Shots for Adults Ages 50–64 Eligibility Flag

The health plan assigns a *Flu Shots for Adults Ages 50–64* Eligibility Flag for each member in the CAHPS 5.0H adult survey sample frame data file.

|  |
| --- |
| Flu Shots for Adults Ages 50–64 Eligibility Flag |
| **1 = Eligible** (the member was born on or between September 2, 1947, and September 1, 1962) |
| **2 = Ineligible** (the member was born before September 2, 1947, or after September 1, 1962) |

The Flu Shots for Adults Ages 50–64 Eligibility Flag identifies the population eligible for the *Flu Shots for Adults Ages 50–64* measure. NCQA calculates the results using responses from respondents with a flag of   
“1 = Eligible.” The use of an eligibility flag protects member confidentiality (using the date of birth could result in a breach of confidentiality).

Questions Included in the Measure

### Table FSA: Flu Shots for Adults Ages 50–64

|  |  |  |
| --- | --- | --- |
| Question | | Response Choices |
| Q45 | Have you had a flu shot since September 1, YYYY?\* | Yes  No  Don’t know |

**\***YYYY = the measurement year (2012 for the survey fielded in 2013).

Calculation of Flu Shots for Adults Ages 50–64

A rolling average is calculated using the following formula.

Rate = (Year 1 Numerator + Year 2 Numerator) / (Year 1 Denominator + Year 2 Denominator)

* If the denominator is less than 100, NCQA assigns a measure result of *NA.*
* If the denominator is 100 or more, NCQA calculates a rate.
* If the health plan did not report results for the current year (Year 2) NCQA assigns a measure result   
  of *NR.*
* If the health plan did not report results in the prior year (Year 1), but reports results for the current year and achieves a denominator of 100 or more, NCQA calculates a rate; if the denominator is less than 100, NCQA assigns a measure result of *NA.*

|  |  |
| --- | --- |
| Changes in submission entity | If a health plan reports HMO and POS products separately in the prior year and reports HMO/POS combined in the current year, Year 1 numerators and denominators are created by combining data from the separate HMO and POS results. The combined Year 1 numerators and denominators are used for the rolling average calculations.  Alternatively, if the health plan reports HMO/POS combined in the prior year and reports HMO and POS separately in the current year, the reporting entity is considered changed and prior year data are not used for rolling average calculations. |
| Denominator | The number of members with a Flu Shots for Adults Ages 50–64 Eligibility Flag of “Eligible” who responded “Yes” or “No” to the question “Have you had a flu shot since September 1, YYYY?” |
| Numerator | The number of members in the denominator who responded “Yes” to the question “Have you had a flu shot since September 1, YYYY?” |

## Flu Shots for Older Adults (FSO)

## Summary of Changes to HEDIS 2013

* No changes to this measure.

Description

The percentage of Medicare members 65 years of age and older who received an influenza vaccination between September 1 of the measurement year and the date when the Medicare CAHPS survey was completed.

Eligible Population

|  |  |
| --- | --- |
| Product line | Medicare. |
| Ages | 65 years and older as of January 1 of the measurement year. |
| Continuous enrollment | Six months prior to the CMS administration of the survey. |
| Allowable gap | None. |
| Current enrollment | Currently enrolled at the time the survey is completed. |

Protocol and Survey Instrument

|  |  |
| --- | --- |
| Medicare | Collected by CMS using the Medicare CAHPS Survey. |

Questions Included in the Measure

### Table FSO: Flu Shots for Older Adults

|  |  |
| --- | --- |
| Question | Response Choices |
| Have you had a flu shot since September 1, YYYY?\* | Yes  No  Don’t know |

\*YYYY = the measurement year (2012 for the survey fielded in 2013).

Calculation of Flu Shots for Older Adults

|  |  |
| --- | --- |
| Denominator | The number of members who responded “Yes” or “No” to the question “Have you had a flu shot since September 1, YYYY?” |
| Numerator | The number of members in the denominator who responded “Yes” to the question “Have you had a flu shot since September 1, YYYY?” |

## Pneumococcal Vaccination Status for Older Adults (PNU)

## Summary of Changes to HEDIS 2013

* Changed the measure name from *Pneumonia Vaccination Status for Older Adults*.

Description

The percentage of Medicare members 65 years of age and older who have ever received a pneumococcal vaccination.

Eligible Population

|  |  |
| --- | --- |
| Product line | Medicare. |
| Ages | 65 years and older as of January 1 of the measurement year. |
| Continuous enrollment | Six months prior to the CMS administration of the survey. |
| Allowable gap | None. |
| Current enrollment | Currently enrolled at the time the survey is completed. |

Protocol and Survey Instrument

|  |  |
| --- | --- |
| Medicare | Collected by CMS using the Medicare CAHPS Survey. |

Questions Included in the Measure

### Table PNU: Pneumococcal Vaccination Status for Older Adults

|  |  |
| --- | --- |
| Question | Response Choices |
| Have you ever had a pneumonia shot? This shot is usually given only once or twice in a person’s lifetime and is different from a flu shot. It is also called the pneumococcal vaccine. | Yes  No  Don’t know |

Calculation of Pneumococcal Vaccination Status for Older Adults

|  |  |
| --- | --- |
| Denominator | The number of members who responded “Yes” or “No” to the question “Have you ever had a pneumonia shot? This shot is usually given only once or twice in a person’s lifetime and is different from the flu shot. It is also called the pneumococcal vaccine.” |
| Numerator | The number of members in the denominator who responded “Yes” to the question “Have you ever had a pneumonia shot? This shot is usually given only once or twice in a person’s lifetime and is different from a flu shot. It is also called the pneumococcal vaccine.” |