

## A Primer on HEDIS

Although many people talk about report cards for medical care, there are few working examples. The most prominent is the Health Plan Employer Data and Information Set, better known as HEDIS. Used by over 400 health plans, HEDIS is a set of standardized performance measures intended to help purchasers and patients compare health plans in terms of quality (instead of simply comparing costs).

HEDIS is perhaps best thought of as a standardized test for health plans. As in most standardized tests, different sections test different domains (e.g., mathematics, language skills). Each domain contains a series of performance measures (e.g., individual questions). Table 1 shows the seven HEDIS domains and selected performance measures.

**TABLE 1**  
**HEDIS Domains\***

DOMAIN	SELECTED PERFORMANCE MEASURES
Effectiveness of care	See Tables 2 and 3
Access and availability of care	Proportion of enrollees with preventive/ambulatory health visits during the reporting year (calculated separately for children and adults) Number of providers (primary, behavioral health, obstetric and prenatal, and dental) Availability of language interpretation services
Satisfaction with experience of care	Member satisfaction
Health plan stability	Disenrollment Provider turnover Indicators of financial stability (e.g., revenue, loss, reserves held by plan)
Use of services	Visits (prenatal care, well-child, adolescent well-care, other ambulatory care) Frequency of selected procedures Cesarean section rate Vaginal birth after cesarean rate Inpatient utilization (acute care, maternity care, newborns, mental health, chemical dependency) Outpatient drug utilization
Cost of care	Actual expense per member per month High-occurrence/high-cost DRGs (e.g., stroke, TIA, pneumonia, asthma, COPD, chest pain, angina pectoris, heart failure and shock, major joint replacement)
Health plan descriptive information	Total enrollment and enrollment by payer Provider characteristics (board certification, residency completion, compensation) Report of plan affiliations with public health, community-based and school-based agencies Cultural diversity of Medicaid membership

\*COPD = chronic obstructive pulmonary disease; DRG = diagnosis-related group; TIA = transient ischemic attack.

HEDIS measures of greatest interest to clinicians are in the effectiveness-of-care domain. Table 2 lists the performance measures, describes how each is calculated, and reports the most recent averages available for the Alliance of Community Health Plans and the national average (representing all participating plans). In each case, a higher proportion is presumed to represent better care. Some patients, however, may have an informed preference to forgo some of these services, such as certain immunizations (see the article by Mehl in this issue).

The individual performance measures have evolved over time. When HEDIS was initiated in 1991, the effectiveness measures focused on vaccination and screening rates. Measures were added

subsequently to reflect treatment quality in diabetic and post-myocardial infarction patients. New measures to examine care of patients with hypertension, asthma, chlamydia, and menopause have been proposed for the next version of HEDIS (Table 3).

As HEDIS performance measures become more complex, so do the questions about measurement methods (e.g., Does a blood pressure of 145/95 mm Hg require control? What constitutes a sufficient discussion of treatment options?).

HEDIS is managed by the National Committee for Quality Assurance (NCQA). NCQA is encouraging the broad use of HEDIS data by employers, consumers, and other health care professionals to compare health plans. Further information can be found at [www.ncqa.org](http://www.ncqa.org).

TABLE 2

## Current Performance Measures in the Effectiveness-of-Care Domain\*

PERFORMANCE MEASURE	NUMERATOR	DENOMINATOR	1997 ACHP AVERAGE	1997 NATIONAL AVERAGE
Childhood immunization rate	DPT, polio, MMR, hepatitis B, HIB	2-yr-olds	78%	65%
Adolescent immunization rate	2nd MMR, hepatitis B, chicken pox	13-yr-olds	12%	8%
Advice to quit smoking	Received advice to quit	Adults $\geq$ 18 yr who are current smokers	69%	64%
Breast cancer screening rate	One or more mammo-grams in the past 2 years	Women aged 52–69 yr	77%	71%
Cervical cancer screening	One or more Pap tests in the past 3 years	Women aged 21–64 yr	77%	71%
Rate of prenatal care in the first trimester	Prenatal care visit between 176 and 280 days before delivery	Women who delivered live babies	88%	83%
Check-ups after delivery	Postpartum visit between 21 and 56 days after delivery	Women who delivered live babies	73%	66%
$\beta$ -blocker treatment rate	$\beta$ -blocker dispensed within 7 days after AMI discharge	Adults $\geq$ 35 yr admitted with a diagnosis of AMI	79%	74%
Diabetic retinal examination rate	Retinal examination by an eye care professional	Adults $\geq$ 31 yr who have diabetes	53%	39%
Rate of follow-up after hospitalization for mental illness	Visit with mental health provider within 30 days of discharge	Individuals $\geq$ 6 yr admitted with a mental health diagnosis	77%	67%

\*ACHP = Alliance of Community Health Plans; AMI = acute myocardial infarction; DPT = diphtheria, pertussis, tetanus; HIB = Haemophilus influenzae type B; MMR = measles, mumps, and rubella; Pap = Papanicolaou.

TABLE 3

## New Effectiveness-of-Care Performance Measures for HEDIS 2000

PERFORMANCE MEASURE	NUMERATOR	DENOMINATOR
Controlling high blood pressure	Blood pressure controlled to below 140/90 mm Hg	Enrollees with high blood pressure
Appropriate medications for people with asthma	Received medications for long-term control (e.g., inhaled corticosteroids)	Enrollees with chronic asthma
Chlamydia screening	Tested for chlamydia	Sexually active women aged 15–25 yr
Management of menopause*	Breadth, depth, and personalization of menopause counseling	Menopausal women

\*This measure encourages plans to discuss with women the pros and cons of various treatment options, such as hormone replacement therapy, so that they can make more informed choices.