

### MY 2024 HEQMS Reporting Table<sup>1</sup>

For MY 2024, health plans must report to the DMHC, via the NCQA summary level results file, stratified rates for ten measures and aggregate rates for all 13 measures.

HEQMS Measure	Report to the DMHC			Stratified, Aggregate, or Both
	Commercial	Medicaid	Exchange	
1. Colorectal Cancer Screening <sup>2</sup>	◆	◆	◆	Both
2. Breast Cancer Screening	◆	◆	◆	Both
3. Glycemic Status Assessment for Patients with Diabetes <sup>3</sup>	◆	◆	Report Glycemic Status >9.0% only	Both
4. Controlling High Blood Pressure	◆	◆	◆	Both
5. Asthma Medication Ratio	◆	◆	◆	Both
6. Depression Screening and Follow-Up for Adolescents and Adults	◆	◆	TBD <sup>4</sup>	Aggregate only*
7. Prenatal and Postpartum Care	◆	◆	◆	Both
8. Childhood Immunization Status <sup>5</sup>	◆	◆	◆	Both

<sup>1</sup> Health plans must submit the NCQA summary level measure results file to the DMHC for all measures, except for the QHP measure, regardless of whether the results file includes both aggregate and stratified results or aggregate only. Measures with an asterisk (\*) will not be stratified by the NCQA for MY 2024.

<sup>2</sup> For MY 2024, the NCQA will retire the traditional reporting method for the Colorectal Cancer Screening measure (COL), and health plans will only report to NCQA via ECDS (COL-E). The DMHC will require health plans to report via ECDS for this measure for MY 2024.

<sup>3</sup> Previously the NCQA called this measure Hemoglobin A1c Control for Patients with Diabetes.

<sup>4</sup> Exchange lines of business will not be required to report on this measure if it is not part of the CMS MY 2024 requirements.

<sup>5</sup> The NCQA anticipates incorporating stratifications for this measure but only via ECDS. The DMHC will require health plans to report via the ECDS for this measure.

HEQMS Measure	Report to the DMHC			Stratified, Aggregate, or Both
	Commercial	Medicaid	Exchange	
9. Well-Child Visits in the First 30 Months of Life	◆	◆	◆	Both
10. Child and Adolescent Well-Care Visits	◆	◆	◆	Both
11. Plan All-Cause Readmissions	◆	◆	◆	Aggregate only*
12. Immunizations for Adolescents	◆	◆	◆	Both
13. CAHPS Health Plan Survey: Getting Needed Care <sup>6</sup>	◆ (Report Adult Only)	◆ (Report Adult & Child)	◆ (QHP) <sup>7</sup>	Aggregate only*

<sup>6</sup> The Getting Needed Care composite score is the overall percentage of members who responded “Always” or “Usually” to questions about how often it was easy for them to get appointments with specialists and get the care, tests, or treatment they needed through their health plan.

<sup>7</sup> Exchange lines of business do not report the CAHPS Health Plan Survey. The DMHC will require reporting of the QHP Enrollee Experience Survey for MY 2024.