

### Specification Updates

This document contains corrections and policy changes or clarifications for *HEDIS 2015 Volume 5: HEDIS Compliance Audit™: Standards, Policies and Procedures*.

Page	Section	Heading/Subtitle	Issue
54	Audit Process: <i>Offsite</i>	Validation of Sample Frames for Survey Measures	<p>Replace the first paragraph of Step 4 with the following text:</p> <ul style="list-style-type: none"> <li>The auditor reviews the output file for every sample frame and verifies compliance with the required layout specified in <i>Volume 3: Specifications for Survey Measures</i> (i.e., that the eligible population and all required data elements are included). For example, a <i>Flu Vaccinations for Adults Ages 18–64 and 65 and Older</i> Eligibility Flag must be set for each member in the adult survey sample frame, and the auditor must determine whether this flag is assigned correctly. For the <i>Children With Chronic Conditions</i> measure, a Prescreen Status Code must be included in the child survey sample frame, and the auditor must assess whether this flag is assigned correctly.</li> </ul>
54	Audit Process: <i>Offsite</i>	Validation of Sample Frames for Survey Measures	<p>Replace the text in Step 5 with the following text:</p> <ul style="list-style-type: none"> <li>For organizations reporting CAHPS results to NCQA, the auditor must zip and password-protect the approved file and indicate approval of the sample frame in the Healthcare Organization Questionnaire (HOQ).</li> </ul> <p>Organizations send the zipped and locked sample frame file and notice of auditor approval to the survey vendor.</p>
66	Audit Process: <i>Offsite</i>	For nonstandard and member-reported supplemental data	<p>Replace the first bullet in the third task with the following text:</p> <ul style="list-style-type: none"> <li>It is after December 1 of the measurement year.</li> </ul>
66	Audit Process: <i>Offsite</i>	For nonstandard and member-reported supplemental data	<p>Replace the third bullet in the third task with the following text:</p> <ul style="list-style-type: none"> <li>Supplemental data collection has stopped. The deadline for data collection is March 2.</li> </ul>

95	Audit Process: <i>Post-Onsite and Reporting</i>	Audit Result Files	<p>Replace the first item with the following text:</p> <ul style="list-style-type: none"> <li>Final rate submission tool, with organization and auditor notes and final auditor approval (i.e., <i>three-year rate comparison, benchmark comparison and discussion of all IDSS warnings</i>).</li> </ul>
9-3	Appendix 9- Certification Measures	Measures Eligible for Certification	<p>Add the following measure:</p> <ul style="list-style-type: none"> <li><i>Proportion of Days Covered (PDC)</i> <i>This is a Pharmacy Quality Alliance (PQA) measure.</i></li> </ul>
10-2	Appendix 10-HEDIS Bias Determination	Bias Determination, Rule 1 (+/-)5 percentage point difference in the reported rate	<p>Add the following measure:</p> <ul style="list-style-type: none"> <li><i>Proportion of Days Covered (PDC)</i> <i>This is a Pharmacy Quality Alliance (PQA) measure.</i></li> </ul>