

Quality Measures Desktop Reference for Medicaid Providers

California | Medi-Cal Managed Care

HEDIS® is a widely used set of performance measures developed and maintained by NCQA. These are used to drive quality improvement efforts.

Please note: The information provided is based on HEDIS MY2024 technical specifications and is subject to change based on guidance given by the National Committee for Quality Assurance (NCQA), CMS, and state recommendations. Please refer to the appropriate agency for additional guidance.

Measure alpha order	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Avoidance of Antibiotic Treatment for Acute Bronchitis/ Bronchiolitis (AAB)	Ages 3 months and older	Per occurrence	The percentage of episodes for members with a diagnosis of acute bronchitis/ bronchiolitis that did not result in an antibiotic dispensing event July 1 of the year prior to the measurement year to June 30 of the measurement year .
Adults' Access to Preventive/ Ambulatory Health Services (AAP)	Ages 20 and older	Annual	The percentage of members who had an ambulatory or preventive care visit. The organization reports three separate percentages for each product line: <ul style="list-style-type: none"> Medicaid and Medicare members who had an ambulatory or preventive care visit during the measurement year.
Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)	Ages 6 to 12	Varies by phase	The percentage of children newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed during the measurement year. Two rates are reported: <ul style="list-style-type: none"> Initiation phase: The percentage of members 6 to 12 years of age with a prescription dispensed for ADHD medication, who had one follow-up visit with a practitioner with prescribing authority during the 30-day initiation phase. Continuation and maintenance (C&M) phase: The percentage of members 6 to 12 years of age with a prescription dispensed for ADHD medication, who remained on the medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least two follow-up visits with a practitioner within 270 days (nine months) after the initiation phase ended.

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Measure alpha order	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Adult Immunization Status (AIS-E)	Ages 19 and older	Annual	The percentage of members who are up to date on recommended routine vaccines for influenza, tetanus and diphtheria (Td), or tetanus, diphtheria and acellular pertussis (Tdap), zoster and pneumococcal during the measurement year.
Antidepressant Medication Management (AMM)	Ages 18 and older	Per episode	The percentage of members who were treated with antidepressant medication, had a diagnosis of major depression, and who remained on an antidepressant medication treatment May 1 of the year prior to the measurement year to April 30 of the measurement year. Two rates are reported: <ul style="list-style-type: none"> • Effective acute phase treatment: The percentage of members who remained on an antidepressant medication for at least 84 days (12 weeks). • Effective continuation phase treatment: The percentage of members who remained on an antidepressant medication for at least 180 days (six months).
Asthma Medication Ratio (AMR)	Ages 5 to 64	Annual	The percentage of members who have been identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM-E)	Ages 1 to 17	Annual	Members who had two or more antipsychotic prescriptions and had metabolic testing during the measurement year. Three rates are reported: <ul style="list-style-type: none"> • The percentage of children and adolescents on antipsychotics who received blood glucose testing (blood glucose or HbA1c). • The percentage of children and adolescents on antipsychotics who received cholesterol testing (LDL-C or cholesterol). • The percentage of children and adolescents on antipsychotics who received both blood glucose and cholesterol testing.
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	Ages 1 to 17	Annual	The percentage of members who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment January 1 through December 1 of the measurement year.
Breast Cancer Screening (BCS-E)	Ages 50 to 74	Every 2 years	The percentage of members who had a mammogram to screen for breast cancer. Look-back period: October 1, two years prior to the measurement period through the end of the measurement period.
Blood Pressure Control Patients with Diabetes (BPD)	Ages 18 to 75	Annual	The percentage of members with diabetes (types 1 and 2) whose blood pressure (BP) was adequately controlled (< 140/90 mm Hg) during the measurement year. The final BP of the measurement year is captured.

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Medical Assistance with Smoking and Tobacco Use Cessation (MSC) CAHPS*	Ages 18 and older	Annual	<p>The following components of this measure assess different facets of providing medical assistance with smoking and tobacco use cessation:</p> <ul style="list-style-type: none"> • 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.
Health Plan Survey 5.1H, Adult Version (CPA) CAHPS*	Members who have been with the plan through the year	Annual	<p>Five composite scores summarize responses in key areas:</p> <ul style="list-style-type: none"> • Claims processing (commercial only) • Customer service • Getting care quickly • Getting needed care • How well doctors communicate <p>Item-specific question summary rates are reported for the rating questions and each composite question. Question summary rates are also reported individually for one item summarizing the following concept: Coordination of care.</p>
Health Plan Survey 5.1H, Child Version (CPC) CAHPS*	Members who have been with the plan through the year	Annual	<p>This measure provides information on parents' experience with their child's Medicaid organization. Results summarize member experiences through ratings, composites, and individual question summary rates.</p> <p>Four global rating questions reflect overall satisfaction:</p> <ul style="list-style-type: none"> • Rating of all health care • Rating of health plan • Rating of personal doctor • Rating of specialist seen most often <p>Four composite scores summarize responses in key areas:</p> <ul style="list-style-type: none"> • Customer service • Getting care quickly • Getting needed care • How well doctors communicate

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			<p>Item-specific question summary rates are reported for the rating questions and each composite question. Question Summary Rates are also reported individually for one item summarizing the following concept: Coordination of care</p>
<p>Children With Chronic Conditions (CCC) CAHPS*</p>	<p>Members who have been with the plan through the year</p>	<p>Annual</p>	<p>This measure provides information on parents' experience with their child's Medicaid organization for the population of children with chronic conditions. Three composites summarize satisfaction with basic components of care essential for successful treatment, management, and support of children with chronic conditions:</p> <ul style="list-style-type: none"> • Access to specialized services. • Family centered care: Personal doctor who knows child. • Coordination of care for Children with Chronic Conditions. <p>Item-specific question summary rates are reported for each composite question. Question summary rates are also reported individually for two items summarizing the following concepts:</p> <ul style="list-style-type: none"> • Access to prescription medicines • Family centered care: Getting needed information.
<p>Controlling High Blood Pressure (CBP)</p>	<p>Ages 18 to 85</p>	<p>Annual</p>	<p>The percentage of members who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (< 140/90 mm Hg) during the measurement year.</p> <p>The final BP of the measurement year is captured.</p>

Measure alpha order	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Contraceptive Care Postpartum Women (CCP) CMS Measure	Ages 15 to 44		<p>This measure includes women ages 15 to 44 who had a live birth, the percentage that:</p> <ul style="list-style-type: none"> • Were provided a most effective or moderately effective method of contraception within 3 and 60 days of delivery: <ul style="list-style-type: none"> ○ Contraceptive types included: sterilization, IUD/IUS, hormonal implant, injectable oral contraception pills, patch, or vaginal ring. • Were provided a long-acting reversible method of contraception (LARC) within 3 and 60 days of delivery: <ul style="list-style-type: none"> ○ Contraceptive types included: IUD/IUS or hormonal implant. <p>These rates are reported at two points in time:</p> <ul style="list-style-type: none"> ○ Contraceptive provision within 3 days of delivery is used to monitor the provision of contraception in the immediate postpartum period. ○ Contraceptive provision within 60 days of delivery is used to monitor the provision of contraception throughout the postpartum period. <p>Women are stratified into two age groups: Ages 15 to 20 and ages 21 to 44.</p> <p>Rates will be reported for the measure by age stratification within two points in time:</p> <ul style="list-style-type: none"> • Contraceptive provision within three days of delivery and • Contraceptive provision within 60 days of delivery and contraceptive type provided
Cervical Cancer Screening (CCS)	Ages 21 to 64	Varies by age	<p>The percentage of members who were recommended for routine cervical cancer screening and were screened for cervical cancer using any of the following criteria:</p> <ul style="list-style-type: none"> • Members 21–64 years of age who had cervical cytology performed within the last three years. • Members 30–64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last five years. • Members 30–64 years of age who had cervical cytology/high-risk human papillomavirus (hrHPV) cotesting within the last five years.
Contraceptive Care-All Women (CCW) CMS Measure	Ages 15 to 44	Varies by age	<p>This measure includes women ages 15 to 44 at risk of unintended pregnancy, the percentage that:</p> <ul style="list-style-type: none"> • Were provided a most effective or moderately effective method of contraception: <ul style="list-style-type: none"> ○ Contraceptive types included: sterilization, IUD/IUS, hormonal implant, injectable oral contraception pills, patch, or vaginal ring. • Were provided a long-acting reversible method of contraception (LARC): <ul style="list-style-type: none"> ○ Contraceptive types included: IUD/IUS or hormonal implant. <p>All women are stratified into two age groups: ages 15 to 20 and ages 21 to 44.</p> <p>Two rates will be reported for the measure:</p> <ul style="list-style-type: none"> • One for the provision of most or moderately effective methods and • One for provision of LARC.

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			The first rate is an intermediate outcome measure, and it is desirable to have a high percentage of women who are provided the most effective or moderately effective contraceptive methods.
Chlamydia Screening in Women (CHL)	Ages 16 to 24	Annual	Percentage of members who were identified as sexually active and who had at least one screening test for chlamydia during the measurement year.
Childhood Immunization Status (CIS)	Ages 0 to 2	Multiple doses	The percentage of members who had appropriate doses of the following vaccines on or before their 2nd birthday: <ul style="list-style-type: none"> • 4 diphtheria, tetanus, and acellular pertussis (DTaP) • 3 polio (IPV) • 1 measles, mumps, and rubella (MMR) (on or between first and second birthday) • 3 haemophilus influenza type B (HiB) • 3 hepatitis B (one of the three vaccinations can be a newborn hepatitis B) • 1 chicken pox (VZV) (on or between first and second birthday) • 4 pneumococcal conjugate (PCV) • 1 hepatitis A (HepA) (on or between first and second birthday) • 2 two-dose RV or 3 three-dose rotavirus (RV) (Or 1 two-dose and two three-dose) • 2 influenza (flu) (Influenza cannot be given until infant is 6 months of age).
Colorectal Cancer Screening (COL-E)	Ages 45 to 75	Dependent on screening type	The percentage of members who had appropriate screening for colorectal cancer. Screenings are defined by one of the following: <ul style="list-style-type: none"> • Fecal occult blood test (FOBT) during the measurement period. • Flexible sigmoidoscopy during the measurement period or the four years prior. • Colonoscopy during the measurement year or the nine years prior. • CT colonography during the measurement period or the four years prior. • Stool DNA (sDNA) with fecal immunochemical test (FIT) test during the measurement period or the two years prior to the measurement period.
Appropriate Testing for Pharyngitis (CWP)	Ages 3 and older	Each occurrence	The percentage of episodes for members who have been diagnosed with pharyngitis, dispensed an antibiotic, and received group A streptococcus (strep) test for the episode on or between July 1 of the year prior to the measurement year to June 30 of the measurement year.
Depression Remission or Response for Adolescents and Adults (DRR-E)	Ages 12 and older	Per episode	The percentage of members with a diagnosis of depression and an elevated PHQ-9 score, who had evidence of response or remission within 120-240 days (4-8 months) of the elevated score during the measurement year: <ul style="list-style-type: none"> • Follow-Up PHQ-9: The percentage of members who have a follow-up PHQ-9 score documented within 120-240 days (4-8 months) after the initial elevated PHQ-9 score. • Depression Remission: The percentage of members who achieved remission within 120-240 days (4-8 months) after the initial elevated PHQ-9 score.

Measure alpha order	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
			<ul style="list-style-type: none"> • Depression Response: The percentage of members who showed response within 120–240 days (4–8 months) after the initial elevated PHQ-9 score.
Depression Screening and Follow-up for Adolescents and Adults (DSF-E)	Ages 12 and older	Per episode	<p>The percentage of members who were screened for clinical depression using a standardized instrument and, if screened positive, received follow-up care during the measurement year:</p> <ul style="list-style-type: none"> • Depression Screening: The percentage of members who were screened for clinical depression using a standardized instrument. • Follow-Up on Positive Screen: The percentage of members who received follow-up care within 30 days of a positive depression screen finding.
Eye Exam for Patients with Diabetes (EED)	Ages 18 to 75	Annual	<p>The percentage of members with diabetes (types 1 and 2) who had one of the following:</p> <ul style="list-style-type: none"> • A retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement year • A negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional in the year prior to the measurement year • Bilateral eye enucleation any time during the member’s history through December 31 of the measurement year.
Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program	Ages 0 to 20	Multiple	<p>Screening must include:</p> <ul style="list-style-type: none"> • Comprehensive health development history (inclusive both physical and mental health). • Comprehensive unclothed physical exam or appropriately draped. • Appropriate immunizations. • Laboratory tests. • Lead toxicity screening. • Health education including anticipatory guidance. • Vision services. • Dental services. • Hearing services. • Other necessary health care — diagnostic services and treatment to correct or ameliorate defects, physical and mental illnesses, and conditions discovered by the screening services.
Follow-Up After Emergency Department Visit for Substance Use (FUA)	Ages 13 and older	Within seven and/or 30 days after ED visit	<p>The percentage of emergency department (ED) visits among members with a principal diagnosis of substance use disorder (SUD), or any diagnosis of drug overdose, for which there was follow-up during the measurement year. Two rates are reported:</p> <ul style="list-style-type: none"> • The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days) • The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days) <p>Note: Follow-up visits that occur on the same day as the ED discharge meet this measure.</p>

Measure alpha order	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Follow-Up After Hospitalization for Mental Illness (FUH)	Ages 6 and older	Within seven and/or 30 days after discharge	<p>The percentage of discharges for members who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses and who had a follow-up visit with a mental health provider during the measurement year. Two rates are reported:</p> <ul style="list-style-type: none"> • The percentage of discharges for which the member received follow-up within 30 days after discharge. • The percentage of discharges for which the member received follow-up within seven days after discharge.
Follow-Up After High Intensity Care for Substance Use Disorder (FUI)	Ages 13 and older	Within seven and/or 30 days after discharge	<p>Percentage of acute inpatient hospitalizations, residential treatment, or withdrawal management visits for a diagnosis of substance use that result in a follow-up visit or service for substance use disorder during the measurement year. Two rates are reported:</p> <ul style="list-style-type: none"> • The percentage of visits or discharges for which the member received follow-up for substance use disorder within the 30 days after the visit or discharge. • The percentage of visits or discharges for which the member received follow-up for substance use disorder within the seven days after discharge. <p>Note: Follow-up visits on the same day of the visit or discharge do not meet this measure.</p>
Follow-Up After Emergency Department Visit for Mental Illness (FUM)	Ages 6 or older	Within seven and/or 30 days after ED visit	<p>The percentage of emergency department (ED) visits for with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness with any practitioner during the measurement year. Two rates are reported:</p> <ul style="list-style-type: none"> • The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days) • The percentage of ED visits for which the member received follow-up within seven days of the ED visit (8 total days)
Glycemic Status Assessment for Patients with Diabetes (GSD)	Ages 18 to 75	Annual	<p>The percentage of members with diabetes (types 1 and 2) whose most recent glycemic status (hemoglobin A1c [HbA1c] or glucose management indicator [GMI]) was at the following levels during the measurement year:</p> <ul style="list-style-type: none"> • Glycemic Status (< 8%) • Glycemic Status (> 9%)
Initiation and Engagement of Substance Use Disorder Treatment (IET)	Ages 13 and older	Per episode	<p>The percentage of new substance use disorder (SUD) episodes that result in treatment initiation and engagement. Two rates are reported:</p> <ul style="list-style-type: none"> • Initiation of SUD treatment: The percentage of new SUD episodes that result in treatment initiation through an inpatient SUD admission, outpatient visit, intensive outpatient encounter, partial hospitalization, telehealth visit, or medication treatment within 14 days November 15 of the year prior to November 14 of the measurement year. • Engagement of SUD treatment: The percentage of new SUD episodes that have evidence of treatment engagement within 34 days of initiation

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Immunizations for Adolescents (IMA)	Ages 9 to 13	Multiple doses	The percentage of members who had one dose of meningococcal vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and have completed the human papillomavirus (HPV) vaccine 2 or 3 dose series by their 13th birthday. The measure calculates a rate for each vaccine and two combination rates: <ul style="list-style-type: none"> • Meningococcal vaccine between 11th and 13th birthday • Tdap vaccine between 10th and 13th birthday • HPV vaccines between 9th and 13th birthday
Kidney Health Evaluation for Patients with Diabetes (KED)	Ages 18 to 85	Annual	The percentage of members with diabetes (type 1 and type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine rate (uACR), during the measurement year.
Use of Imaging Studies for Low Back Pain (LBP)	Ages 18 to 75	Not applicable	Percentage of members who had a primary diagnosis of lower back pain and did not have an imaging study (such as a plain X-ray, MRI, or CT scan) within 28 days of the diagnosis January 1–December 3 of the measurement year.
Lead Screening in Children (LSC)	Ages 0 to 2	Once before age 2	The percentage of members who had one or more capillary or venous lead blood test by their 2nd birthday.
Pharmacotherapy Management of COPD Exacerbation (PCE)	Ages 40 and older	Inpatient discharge or ED event	The percentage of COPD exacerbations for members who had an acute inpatient discharge or emergency department (ED) visit on or between January 1 to November 30 of the measurement year and who were dispensed appropriate medications. Two rates are reported: <ul style="list-style-type: none"> • Dispensed a systemic corticosteroid (or there was evidence of an active prescription) within 14 days of the event. • Dispensed a bronchodilator (or there was evidence of an active prescription) within 30 days of the event.
Plan All-Cause Readmissions (PCR)	Ages 18 to 64	Per occurrence	The number of acute inpatient and observation stays during the measurement year that were followed by an unplanned acute readmission for any diagnosis within 30 days and the predicted probability of an acute readmission.

Measure alpha order	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Postpartum Depression Screening and Follow-up (PDS-E)	N/A	Annual	<p>The percentage of deliveries in which members were screened for clinical depression during the postpartum period, and if screened positive, received follow-up care during the measurement year:</p> <ul style="list-style-type: none"> • Depression Screening: The percentage of deliveries in which members were screened for clinical depression using a standardized instrument during the postpartum period. • Follow-Up on Positive Screen: The percentage of deliveries in which members received follow-up care within 30 days of a positive depression screen finding
Prenatal Depression Screening and Follow-up (PND-E)	N/A	Annual	<p>The percentage of deliveries in which members were screened for clinical depression while pregnant and, if screened positive, received follow-up care during the measurement year:</p> <ul style="list-style-type: none"> • Depression Screening: The percentage of deliveries in which members were screened for clinical depression during pregnancy using a standardized instrument. • Follow-Up on Positive Screen: The percentage of deliveries in which members received follow-up care within 30 days of a positive depression screen finding.
Pharmacotherapy for Opioid Use Disorder (POD)	Ages 16 and older	Annual	The percentage of opioid use disorder (OUD) pharmacotherapy events that lasted at least 180 days with a diagnosis of OUD and a new OUD pharmacotherapy event July 1 of the year prior to the measurement year to June 30 of the measurement year.
Prenatal and Postpartum Care (PPC)	Live birth	Per occurrence	<p>The percentage of deliveries of live births on or between October 8 of the year prior to the measurement year and October 7 of the measurement year. For these members, the measure assesses the following facets of prenatal and postpartum care:</p> <ul style="list-style-type: none"> • Timeliness of prenatal care: The percentage of deliveries that received a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment in the organization. • Postpartum care: The percentage of deliveries that had a postpartum visit on or between 7 and 84 days after delivery.
Prenatal Immunization Status (PRS-E)	N/A	Annual	The percentage of deliveries in the measurement period in which members had received influenza and tetanus, diphtheria toxoids, and acellular pertussis (Tdap) vaccinations during the measurement year.
Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA)	Ages 18 and older	Annual	The percentage of members with schizophrenia or schizoaffective disorder who were dispensed and remained on the antipsychotic medication for at least 80% of their treatment period (treatment period begins on earliest prescription dispensing date for any antipsychotic medication during the measurement year).

Measure alpha order	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Statin Therapy for Patients with Cardiovascular Disease (SPC)	Men ages 21 to 75 Women ages 40 to 75	Annual	The percentage of members who are identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and met the following criteria: <ul style="list-style-type: none"> • Received statin therapy: Members who were dispensed at least one high- or moderate-intensity statin medication during the measurement year. • Statin adherence 80%: Members who remained on a high- or moderate-intensity statin medication for at least 80% of the treatment period (treatment period begins with the earliest dispensing event for any high-intensity or moderate-intensity statin medication during the measurement year).
Statin Therapy for Patients with Diabetes (SPD)	Ages 40 to 75	Annual	The percentage of members with diabetes who do not have clinical atherosclerotic cardiovascular disease (ASCVD) who met the following criteria. Two rates are reported: <ul style="list-style-type: none"> • Received statin therapy: Members who were dispensed at least one statin medication of any intensity during the measurement year. • Statin adherence 80%: Members who remained on a statin medication of any intensity for at least 80% of the treatment period (treatment period begins with the earliest dispensing event for any statin medication during the measurement year).
Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)	Ages 18 to 64	Annual	The percentage of members with schizophrenia, schizoaffective disorder, or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test (glucose test and/or HbA1c test) during the measurement year.
Topical Fluoride for Children (TFL-CH)	Ages 1 to 4	Annual	The percentage of members who received at least two fluoride varnish applications during the measurement year.
Appropriate Treatment for Upper Respiratory Infection (URI)	Ages 3 months and older	Per occurrence	The percentage of episodes for members with a diagnosis of upper respiratory infection (URI) that did not result in an antibiotic dispensing event July 1 of the year prior to the measurement year to June 30 of the measurement year.
Well-Child Visits in the First 30 Months of Life (W30)	Ages 0 to 15 months Ages 15 to 30 months	Six visits Two visits	Members who had the following number of well-child visits with a PCP during the last 15 months. The following rates are reported: <ul style="list-style-type: none"> • Well-child visits in the first 15 months: Children who turned 15 months old during the measurement year; six or more well-child visits. • Well-child visits for age 15 to 30 months: children who turned 30 months old during the measurement year; two or more well-child visits.

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Weight Assessment (WCC)	Ages 3 to 17	Annual	The percentage of members who had an outpatient visit with a PCP or OB/GYN during the measurement year in which the following were documented: <ul style="list-style-type: none"> BMI percentile documentation.
Child and Adolescent Well-Care Visits (WCV)	Ages 3 to 21	Annual	Members who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.]

Patient care opportunities

You can find patient care opportunities within the Patient360 application located on Availity Essentials Payer Spaces. To access the Patient360 application you must have the Patient360 role assignment. From Availity's home page select **Payer Spaces**, then choose the health plan from the menu. Choose the Patient360 tile from the Payer Space Applications menu and complete the required information on the screen. Gaps in care are located in the *Active Alerts* section of the **Member Summary**.