2022 Program	Program Measure Definition	Measure	Medic	are Adva	ntage	Ν	Commercial		
Measure		Туре	Star Recognition	Model Practice	Medical Home	Quality Recognition	Model Practice	Medical Home	Model Practice
Admissions	The admissions per thousand utilization ratio is based on the total number of acute inpatient admissions within the measurement period per 1,000 Humana-covered paneled patients.	Clinical and							
Per Thousand (APT)	Measure Timeline : The prior 12-month period, with the last day of the period being the last day of the reporting quarter.	Strategic							×
Adults' Access to Preventive/Ambulatory Health Services ¹ (AAP)	The percentage of members 20 years of age and older who had an ambulatory or preventive care visit within the measurement year. ¹	Quality				~	~	~	
	Measure Timeline: Jan. 1 of the measurement year through Dec. 31 of the measurement year.	Quality				× KY, SC	× кү, sc	× sc	
Annual Wellness Visit (AWV)/Initial Preventive	Provider must ensure all paneled patients have an AWV or IPPE within the measurement year.	Clinical and Strategic		×	×				
Physical Examination (IPPE)	Measure Timeline: Jan. 1 of the measurement year through Dec. 31 of the measurement year.								
Avoidable Hospitalization	The total number of acute inpatient and observation visits with a principal diagnosis related to acute or chronic conditions within the measurement period per 1,000 Humana-covered paneled patients ages 18 or older.	Clinical and Strategic		×	×				
per Thousand (AHPT)	Measure Timeline : The prior 12-month period, with the last day of the period being the last day of the reporting quarter.								
Breast Cancer Screening ¹ (BCS)	The percentage of women ages 52 to 74 who had one or more mammograms within the measurement year or 15 months prior to the measurement year.								
	Measure Timeline : Oct. 1 two years prior to the measurement year through Dec. 31 of the measurement year.	Quality	×	×	×	КҮ	КҮ		×

2022 Program Measure	Program Measure Definition	Measure	Medicare Advantage			Ν	Commercial		
		Туре	Star Recognition	Model Practice	Medical Home	Quality Recognition	Model Practice	Medical Home	Model Practice
Cervical Cancer Screening ¹ (CCS)	 The percentage of paneled patients who are female and are ages 21 to 64 who were screened for cervical cancer using either of the following criteria: Women 21–64 who had a cervical cytology performed within the measurement year or two years prior to the measurement year Women 30–64 who had a cervical high risk human papillomavirus (hrHPV) test within the measurement year or four years prior to the measurement year Women 30–64 who had a cervical cytology/hrHPV co-testing performed within the measurement year or four years prior to the measurement year 	Quality				×	×	×	×
	Measure Timeline : Jan. 1 two years (or four years based on criteria) prior to the measurement year through Dec. 31 of the measurement year.					KY, SC	KY, SC	SC	
Child and Adolescent Well- Care Visits ^{1, 2} (Total) (WCV)	The percentage of patients who are ages 3 to 21 within the measurement year and who had at least one well-care visit with a primary care provider (PCP) or an OB-GYN practitioner within the measurement year. Measure Timeline: Jan. 1 of the measurement year through Dec. 31 of the	Quality				×	×	×	×
	measurement year.					KY, SC	KY, SC	SC	
	The percentage of children who turn 2 years old within the measurement year must complete the following series of vaccinations:								
Childhood Immunization Status ^{1, 2} (Combination 3) (CIS)	 Four (4) diphtheria, tetanus and acellular pertussis (DTaP) vaccinations with different dates of service on or before the child's second birthday Three (3) polio (IPV) vaccinations with different dates of service on or before the child's second birthday One (1) measles, mumps and rubella (MMR) vaccination on or between the child's first and second birthdays Three (3) haemophilus influenza type B (HiB) vaccinations with different dates of service on or before the child's second birthday Three (3) hepatitis B (HepB) vaccinations with different dates of service on or before the child's second birthday Three (3) hepatitis B (HepB) vaccinations with different dates of service on or before the child's second birthday One (1) chicken pox (VZV) vaccination on or between the child's first and second birthdays Four (4) pneumococcal conjugate (PCV) vaccination with different dates of service on or before the child's second birthday 	Quality				×	×	×	×
	Measure Timeline: Jan. 1 of the year prior to the measurement year through Dec. 31 of the measurement year.					KY, SC	KY, SC	SC	

¹ Based on Healthcare Effectiveness Data and Information Set (HEDIS[®])

² Applicable to Pediatric category only

2022 Program	Program Measure Definition	Measure	Medic	are Adva	ntage	I	Commercial		
Measure		Туре	Star Recognition	Model Practice	Medical Home	Quality Recognition	Model Practice	Medical Home	Model Practice
Colorectal Cancer Screening ¹ (COL)	 The percentage of patients ages 50 to 75 who have had one or more appropriate screenings for colorectal cancer. Appropriate screenings are defined by any of the following: Fecal occult blood test within the measurement year Flexible sigmoidoscopy within the measurement year or the four years prior to the measurement year Colonoscopy within the measurement year or the nine years prior to the measurement year FIT-DNA (commonly referred to by the brand name Cologuard) within the measurement year CT colonography within the measurement year or four years prior to the measurement year 	Quality	×			×	×		
	Measure Timeline: Varies by type of compliance event					КҮ	кү		
Controlling High Blood	The percentage of members ages 18 to 85 who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (< 140/90 mmHg) within the measurement year.	Quality	Display Measure	Display Measure	Display Measure	×	×	×	
Pressure ¹ (CBP)	Measure Timeline : Jan. 1 of the measurement year through Dec. 31 of the measurement year.		Only	Only	Only	KY, SC	KY, SC	SC	
Depression Screening ²	The percentage of eligible patients ages 12–21 who were screened for clinical depression within the measurement year.	- Quality							Display Measure
Depression Screening	Measure Timeline: Jan. 1 of the measurement year through Dec. 31 of the measurement year.								Only
Diabetes Care –	The percentage of diabetic patients ages 18 to 75 whose most recent A1c level within the measurement year was less than or equal to 9%.	Quality							
Blood Sugar Not Poor Controlled	Measure Timeline: Jan. 1 of the measurement year through Dec. 31 of the measurement year.	Quality	×	×	×	× кү, sc	🗙 кү, sc	× sc	

¹ Based on Healthcare Effectiveness Data and Information Set (HEDIS[®])

² Applicable to Pediatric category only

3

2022 Program		Measure	Medicare Advantage			Medicaid			Commercial	
Measure	Program Measure Definition	Туре	Star Recognition	Model Practice	Medical Home	Quality Recognition	Model Practice	Medical Home	Model Practice	
Diabetes Care –	The percentage of diabetic patients ages 18 to 75 who had an HbA1c test within the measurement year.	Quality								
HbA1c Testing ¹ (CDC)	Measure Timeline: Jan. 1 of the measurement year through Dec. 31 of the measurement year.	Quality							×	
Diabetes Care – Medical Attention for Nephropathy ¹ (CDC)	The percentage of diabetic patients ages 18 to 75 with diabetes (Type 1 or Type 2) who had a kidney function test within the measurement year.									
	Measure Timeline: Jan. 1 of the measurement year through Dec. 31 of the measurement year.	Quality	×	×	×					
Emergency Room Visits per	The emergency room (ER) utilization ratio is based on the total number of ER visits not resulting in an inpatient admission or observation stay within the measurement period per 1,000 Humana-covered paneled patients.	Clinical and Strategic		×	×	×	×	×	×	
Thousand (ER VPT)	Measure Timeline : The prior 12-month period, with the last day of the period being the last day of the reporting quarter.			~		SC	SC	SC		
Immunizations for Adolescents ^{2, 3} (Combination 2) (IMA)	 The percentage of adolescents who turn 13 within the measurement year must complete the following series of vaccinations: One (1) meningococcal vaccination on or between the patient's 11th and 13th birthdays One tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccination on or between the patient's 10th and 13th birthdays Two (2) human papillomavirus (HPV) vaccinations with dates of service at least 146 days apart on or between the patient's 9th and 13th birthdays or three (3) HPV vaccines with different dates of service on or between the patient's 9th and 13th birthdays 	Quality				×	×	×	×	
	Measure Timeline: Varies by the date of birth of the patient, based on the date they turn 9 years old through Dec. 31 of the measurement year					KY, SC	KY, SC	SC		

¹ Retired measures – will remain a PCP QRP measure in 2022

² Based on Healthcare Effectiveness Data and Information Set (HEDIS[®])

³ Applicable to the Pediatric category only

4

2022 Program	Program Measure Definition	Measure	Medic	are Adva	ntage	Ν	Commercial		
Measure		Туре	Star Recognition	Model Practice	Medical Home	Quality Recognition	Model Practice	Medical Home	Model Practice
Immunizations – Influenza ¹	The percentage of eligible patients ages 1–21 who had an influenza (flu) vaccination completed within the measurement year.	Quality							×
	Measure Timeline : Jan. 1 of the measurement year through Dec. 31 of the measurement year.	Quanty							
Kidney Health Evaluation for Patients with Diabetes ² (KED)	The percentage of members ages 18 to 85 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 ratio (uACR), during the measurement year. Measure Timeline: Display measure only	Quality	Display Measure Only	Display Measure Only	Display Measure Only				
Lead Screening for Children ^{1, 2} (LSC)	The percentage of children 2 years of age who had one or more capillary or venous lead blood tests for lead poisoning by their second birthday. Measure Timeline : Jan. 1 of the measurement year through Dec. 31 of the	Quality				×	×		
	measurement year.					КҮ	кү		
Medication Adherence (3-Measure Combo)	The percentage of patients ages 18 and older who fill their prescription(s) for cholesterol (e.g., statins), diabetes (e.g., noninsulin antidiabetics) and/or hypertension (e.g., angiotensin-converting enzyme [ACE] inhibitors, angiotensin receptor blockers [ARBs], direct renin inhibitors [DRIs]) management often enough to cover 80% or more of the time they are supposed to be taking the medication.	Quality	×	×	×				×
	Measure Timeline : Jan. 1 of the measurement year through Dec. 31 of the measurement year.								
Medication Reconciliation Post-Discharge ³ (MRP)	The percentage of patients whose medication therapies were reviewed and reconciled in the outpatient medical record within 30 days after leaving the hospital.	Quality	×						
	Measure Timeline : Jan. 1 of the measurement year through Dec. 31 of the measurement year.	Quality	^						

¹ Applicable to the Pediatric category only

² Based on Healthcare Effectiveness Data and Information Set (HEDIS[®])

³ Retired measure – will remain a PCP QRP measure in 2022

2022 Program	Program Measure Definition	Measure	Medic	are Adva	ntage	Ν	Commercial		
Measure		Туре	Star Recognition	Model Practice	Medical Home	Quality Recognition	Model Practice	Medical Home	Model Practice
Patient Experience Rating ¹ (PER)	The average score of post-PCP-visit telephone surveys from Humana with questions aligned with the following four categories: • Getting Care Quickly • Getting Needed Care • Coordination of Care • Patient Discussion with the Healthcare Provider Measure Timeline: Jan. 1 of the measurement year through Dec. 31 of the measurement year.	Clinical and Strategic	×	×	×				
Statin Use in Persons with Diabetes (SUPD)	The percentage of patients between ages 40 and 75 who received at least two diabetes medication fills who also received a statin medication within the measurement year. Measure Timeline : Jan. 1 of the measurement year through Dec. 31 of the measurement year.	Quality	×	×	×				
Transition of Care ² (TRC)	 The percentage of discharges for members ages 18 and older who had each of the following. Four rates are reported: Notification of Inpatient Admission – Documentation of receipt of notification of inpatient admission on the day of admission through two days after the admission (three total days) Receipt of Discharge Information – Documentation of receipt of discharge information on the day of discharge through two days after the discharge (three total days) Patient Engagement After Inpatient Discharge – Documentation of patient engagement (e.g., office visits, visits to the home, telehealth) provided within 30 days after discharge) Medication Reconciliation Post-Discharge – Documentation of medication reconciliation on the date of discharge through 30 days after discharge (thirty-one [31] total days) 	Quality	Display Measure Only	Display Measure Only	Display Measure Only				

¹ Star Recognition program will measure the Getting Care Quickly category **only**.

2022 Program		Measure	Medicare Advantage			Ν	Commercial		
Measure	Program Measure Definition	Туре	Star Recognition	Model Practice	Medical Home	Quality Recognition	Model Practice	Medical Home	Model Practice
	The percentage of eligible members ages 3 to 17 who had a visit with a PCP or OB-GYN practitioner within the measurement year and had evidence of:								
Weight Assessment & Counseling for Nutrition & Physical Activity ^{1, 2} (WCC)	 Body Mass Index (BMI) percentile documentation Counseling for nutrition Counseling for physical activity 	Quality							×
	Measure Timeline : Jan. 1 of the measurement year through Dec. 31 of the measurement year.								
Well-Child Visits in the First 15 Months of Life ^{1, 2}	The percentage of members who turned 15 months old within the measurement year and who had at least six well-child visits with a PCP during their first 15 months of life.	Quality				×	×	×	×
(6 or more visits) (W30)	Measure Timeline: Varies by the date of birth of the patient through Dec. 31 of the measurement year					KY, SC	KY, SC	SC	
	The percentage of members who turned 30 months old within the measurement year and who had at least two well-child visits with a PCP on different dates of service between the child's 15-month birthday plus 1 day and the 30-month birthday.	Quality				×	×	×	×
	Measure Timeline: Varies by the date of birth of the patient through Dec. 31 of the measurement year					KY, SC	KY, SC	SC	