



Health New England
Where you matter.

HEDIS

Effective Date 1/1/2021 | Revised Date 1/1/2021

Health Plan Employer Data and Information Set (HEDIS) is the most widely used set of performance measures in the managed care industry. HEDIS is developed and maintained by the National Committee for Quality Assurance (NCQA), a nonprofit organization committed to assessing, reporting on and improving the quality of care provided by organized delivery systems. HEDIS was originally designed for private employers' needs as purchasers of health care. It has since been adapted for use by public purchasers, regulators, and consumers.

Quality improvement activities, health management systems and provider profiling efforts have all used HEDIS as a core measurement set. HEDIS also is used as an element of NCQA accreditation, and is considered the consumer report card for managed care organizations.

HNE collects HEDIS data from three major sources. The first source is administrative data gathered from claims, encounter and enrollment systems. The second source is the medical record. HNE generally requests copies of medical records for HEDIS reviews during March, April, and May. The third source is survey information. For some measures, administrative and medical record data are commonly combined in a standardized manner known as the hybrid method. Data derived purely from administrative sources reflect rates that consider every eligible member and occurrence. All other data are based on samples of members and services. These samples must be drawn in a systematic fashion that has been specified by NCQA. NCQA publishes summary data in its annual *State of Management Care Quality* report and at its website: www.ncqa.org.

See [current HEDIS measures](#).