Property	IQF/CBE ID #		Appendix I: Hawaii Med-QUEST Quality Strategy Performance Measures, Baseline and Targets																	
	IQF/CBE ID #	re			Baseline	Baseline (Value)	RY2026 Target/	Qu	ality Strategy	Objectives Add	lressed	Reporting		irements	Repor		(20,000.00)	Reporting Agen	icies/Facilities	
1	Steward	PIM Code	Performance Measure (PM) Name	PM Indicator	11.5			1 2 2 4	F 6 7 9	0 10 11 13	13 14 15 16		orted to P4P	Audited by	Reported to	P4P	Audited by Reported to P4P Audited by	I Plans CCS Plan Hospitals	Nursing MQD	Other
	1000			· · · · · · · · · · · · · · · · · · ·			- '	1 2 3 4	5 0 7 8	9 10 11 12	13 14 15 16		X X	HSAG				X	acilities	(Specify)
1							0.35%						X					X		
2	0020 1100/1	. ,	· · · · · · · · · · · · · · · · · · ·										X					X		
The content of the	0326 NCQA	A ACP	Advance Care Planning	LTSS—18+ Years	2022	6.91%	7.19%					Every Year	X		X		Х	X		
2													Λ		-			X		+
The content of the	0105 NCQA	A AMM	Antidepressant Medication Management			60.33%						 	X	X ¹	X		X ¹ X X ¹	X X		
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19	2800 NCQA	A APM											X		X		x	X		
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B						22.65%						Every Year	X		X		×	X		
1	2800 NCQA	A APM			2022	21.68%	22.55%					Every Year	Х		Х		X	X		
A	2801 NCQA	A APP	·	·	2022	61.54%	64.00%					Every Year	Х		Х		x	x		
State Control Contro			Breast Cancer Screening	Breast Cancer Screening									X	V	- ,		~	X		
20													X					X		
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24 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10	2902 OPA (CCP-AD; CCP-	CH Contraceptive Care—Postpartum Women	Most or Moderately Effective Contraception—3 Days	2022		9.41%					Every Year	X		X		Х	X		
38	i i			i ' '						+ + + +	+ + + +		X	Х			and the same of th	X		
20 20 20 20 20 20 20 20	2903 OPA C		-										х		Х		X	Х		
Proceedings Control				Long-Acting Reversible Method of Contraception (LAPC)		22 60%			 	+ + + + +	 		X		Y		у	X		
A.										++++	+++				^		^	^		
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The color of the	0033 NCQA	CHL	Chlamydia Screening in Women	Chlamydia Screening in Women (Total)	2022	49.18%	51.15%					Every Year	Х		Х		X	Х		
20 15 15 15 15 15 15 15 1	0038 NCQA	A CIS		Combination 3									Х Х	X	Х	Х	X X X X	X		
13 1986 PGA COS-640 Conservation of Proceduration (Conservation of Proceduration Conservation) 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997 1997	· ·												X	+	- ,			X		
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27 Cl MCOA Fals Fals Supercong of fault and fall his Fals Supe							V=11.07.1						X	Х	'			X X		
10 10 11 10 10 10 10 10	0101 NCQA	Falls1	Falls: Screening for Future Fall Risk	Part 1: Screening	2022	47.61%	49.51%					Every Year	X		X		X	X		
Second S	0101 NCQA	A Falls2	Falls: Screening for Future Fall Risk	Part 2: Risk Assessment	2022	73.53%	76.47%					Every Year	X		X		X	X		+
3486 NULL 100 September 100 Septembe	0101 NCQA	A Falls3	Falls: Screening for Future Fall Risk	Part 3: Plan of Care	2022	57.35%	59.64%					Every Year	Х		Х		x	Х		
3488 NCDA FLA			Follow Up After FD Visit for Alcohol and Other Drug Abuse or																	
42 0575 NCQA FUH Collect up After Hospitalization for Mental Illess 30 Dy Follow Up 2022 60 A776 62 996 1 1 1 1 1 1 1 1 1	3488 NCQA	A FUA	·	30-Day Follow-Up (Total)	2022	25.21%	26.22%					Every Year	Х	X ¹	Х		X^1 X X^1	x x		
2	2499 NCOA	FILA	Follow-Un After FD Visit for Alcohol and Other Drug Abuse or	7 Day Fallow Ha (Total)	2022	17.700/	19 410/					Fuery Veer	V				v1 V v1	V V		
All 10576 NCQA FLM follow-light After responsible protectives for Mental Illness 7-Dy y Follow-Up Text 10576 NCQA FLM follow-light After responsible performent Visit for Mental Illness 3-Dy y Follow-Up Text 10576 NCQA FLM follow-light After responsible performent Visit for Mental Illness 7-Dy y Follow-Up Text NCQA FLM follow-light After responsible performent Visit for Mental Illness 7-Dy y Follow-Up Text NCQA FLM follow-light After responsible performent Visit for Mental Illness 7-Dy y Follow-Up Text NCQA FLM FL	· ·		Dependence									i i	^ <u> </u>	X	^		X X X	X X		+-
5 3489 N.COA F.UM Follow-Up After Emergency Department Visit for Mental Illness 7-Day Follow-Up (Total) 2022 35,13% 33,47% 1 1 1 1 1 1 1 1 1													X X		^	Х	A A A	XXX		
Head Hemoglobin Ats Control for Fatients With Diabetes Hohat Control (688) 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 100					_							· · · · · · · · · · · · · · · · · · ·	X	X ¹				X X X		+-
Ag 2607 NCQA HPCMI-AD Diabetes Care for People with SMI: HbA1c Poor Control (>9.0%)* Diabetes Care for People with SMI: HbA1c Poor Control (>9.0%)* Diabetes Care for People with SMI: HbA1c Poor Control (>9.0%)* Diabetes Care for People with SMI: HbA1c Poor Control (>9.0%)* Diabetes Care for People with SMI: HbA1c Poor Control (>9.0%)* Diabetes Care for People with SMI: HbA1c Poor Control (>9.0%)* Diabetes Care for People with SMI: HbA1c Poor Control (>9.0%)* Severy Vear X X X X X X X X X			· · · · · · · · · · · · · · · · · · ·	· · · · · ·	_								X X	X		Х	X X	X		
49 2082; 3210e HRSA	0059 NCQA	A HBD	Hemoglobin A1c Control for Patients With Diabetes	HbA1c Poor Control (>9%)	2022	37.10%	35.62%					Every Year	Х	X	Х		x x x	X		
So DOUGH NCQA IET Initiation and Engagement of AOD Abuse or Dependence Treatment Initiation of AOD Treatment (Total) 2022 37.08% 38.56%	2607 NCQA	HPCMI-AD	Diabetes Care for People with SMI: HbA1c Poor Control (>9.0%) ▼	Diabetes Care for People with SMI: HbA1c Poor Control (>9.0%)	2022	50.20%	48.20%					Every Year	Х		Х		x	x		
Standard	2082; 3210e HRSA	HVL-AD	HIV Viral Load Suppression	HIV Viral Load Suppression	2022	3.67%	3.82%					Every Year	Х		Х		X	X		
S2 1407 NCQA IMA Immunizations for Adolescents Combination 1 (Meningococcal, Tdap) 2022 66.90% 69.58%	0004 NCQA	A IET	Initiation and Engagement of AOD Abuse or Dependence Treatment	Initiation of AOD Treatment (Total)	2022	37.08%	38.56%					Every Year	Х	X	Х		x x x	X X		
Sa 1408 NCQA IMA Immunizations for Adolescents Combination 2 (Meningococcal, Tdap, HPV) 2022 38.58% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40.12% 40	0005 NCQA	A IET	Initiation and Engagement of AOD Abuse or Dependence Treatment	Engagement of AOD Treatment (Total)	2022	11.09%	11.53%					Every Year	Х	Х	Х		x x x	х х		
Second PQA OHD-AD Use of Opioids at High Dosage in Persons Without Cancer Use of Opioids at High Dosage in Persons Without Cancer Use of Opioids at High Dosage in Persons Without Cancer Second S	· ·												X					X		
55 3400 CMS OUD-AD Use of Pharmacotherapy for Opioid Use Disorder Total (Rate 1) 2022 50.42% 52.44%	= 100			· · · · · · · · · · · · · · · · · · ·	_					+ + + +		1 1 ' 1	X				<i>"</i>	X		
57 3400 CMS OUD-AD Use of Pharmacotherapy for Opioid Use Disorder Oral Naltrexone (Rate 3) 2022 0.98% 1.02%	3400 CMS	OUD-AD	Use of Pharmacotherapy for Opioid Use Disorder	Total (Rate 1)	2022	50.42%	52.44%					Every Year	X	Х	, ,			X		
58 3400 CMS OUD-AD Use of Pharmacotherapy for Opioid Use Disorder Long-Acting, Injectable Naltrexone (Rate 4) 59 3400 CMS OUD-AD Use of Pharmacotherapy for Opioid Use Disorder Methadone (Rate 5) 60 1768 NCQA PCR Plan All-Cause Readmissions Index Total Stays—Observed/Expected Ratio—Total 61 1517 NCQA PPC Prenatal and Postpartum Care Timeliness of Prenatal Care 622 0.26% 0.27% 63 0.27% 64 0.27% 65 0.27% 66 0.27% 67 0.27% 68 0.27% 69 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60 0.27% 60										+++-			X		· · · · · ·			X		+
60 1768 NCQA PCR Plan All-Cause Readmissions Index Total Stays—Observed/Expected Ratio—Total 2022 0.8624 0.8969	3400 CMS	OUD-AD	Use of Pharmacotherapy for Opioid Use Disorder	Long-Acting, Injectable Naltrexone (Rate 4)	2022	0.26%	0.27%					Every Year	X	X	X		X X X	X		
				Index Total Stays—Observed/Expected Ratio—Total		0.8624	0.8969						X X	X		Х	A A A	X		
62 1517 NCQA PPC Prenatal and Postpartum Care Postpartum Care Postpartum Care Postpartum Care Postpartum Care					2022 2022	83.78% 77.56%	87.13% 80.66%					Every Year Every Year	X X	X	^		A A A A	X		
63 NA NCQA SAA Adherence to Antipsychotic Medications for Individuals With Schizophrenia 2022 69.29% 72.06% Every Year X X X X X X X X X X X X X X X X X X X	2027		Adherence to Antipsychotic Medications for Individuals With										X	x ¹	X	,	χ^1 χ χ^1	X X		
Schizophrenia Diabetes Screening for People w/ Schizophrenia or Binolar Dx using Diabetes Screening for People w/ Schizophrenia or Binolar Dx using Diabetes Screening for People w/ Schizophrenia or Binolar Dx using Diabetes Screening for People w/ Schizophrenia or Binolar Dx using			Schizophrenia										V	,			V	V		
64 1932 NCQA SSD Antipsychotics Antipsychotics Antipsychotics			Antipsychotics	Antipsychotics							+++		х У У	V	X	V	X	Х У		
65 1392 NCQA W30 Well-Child Visits in the First 30 Months of Life 15 Months X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X<					_								X			^		X		
67 0024 NCQA WCC Weight Assessment and Counseling for Nutrition/Physical Activity BMI Percentile Documentation X X Every Year X X X X X X X X X X X X X X X X X X X	0024 NCQA	wcc wcc	Weight Assessment and Counseling for Nutrition/Physical Activity	BMI Percentile Documentation	2022	80.89%	84.13%					Every Year	Х		Х		X	Х		
68 0024 NCQA WCC Weight Assessment and Counseling for Nutrition/Physical Activity Counseling for Nutrition 2022 77.85% 80.96% X X X X X X X X X X X X X X X X X X X	0024 NCQA	A WCC	Weight Assessment and Counseling for Nutrition/Physical Activity	Counseling for Nutrition	2022	77.85%	80.96%					Every Year	Х		Х		X	Х		
									+++	+++			v		V		v	Y		
						73.45%			+++	++++	+++		٨		X		۸	^		4
70 1516 NCQA WCV Child and Adolescent Well-Care Visits Child and Adolescent Well-Care Visits Child and Adolescent Well-Care Visits 2022 46.04% 47.88%	1516 NCQA	WCV	Child and Adolescent Well-Care Visits	Child and Adolescent Well-Care Visits	2022	46.04%	47.88%					Every Year	Х	Х	Х	Х	X X X X	X		
71 0272 AHRQ PQI01 PQI 01: Diabetes Short-Term Complications Admission Rate PQI 01: Diabetes Short-Term Complications Admission Rate X No. 10					_							<u> </u>	Х					X		
72 0274 AHRQ PQI03 PQI 03: Diabetes Long-Term Complications Admission Rate PQI 03: Diabetes Long-Term Complications Admission Rate X PQI 03: Diabetes Long-Term Complications Admission Rate X X PQI 03: Diabetes Long-Term Complications Admission Rate X X PQI 03: Diabetes Long-Term Complications Admission Rate X X PQI 03: Diabetes Long-Term Complications Admission Rate X X PQI 03: Diabetes Long-Term Complications Admission Rate X X PQI 03: Diabetes Long-Term Complications Admission Rate X X PQI 03: Diabetes Long-Term Complications Admission Rate X X PQI 03: Diabetes Long-Term Complications Admission Rate X X PQI 03: Diabetes Long-Term Complications Admission Rate X X PQI 03: Diabetes Long-Term Complications Admission Rate X X PQI 03: Diabetes Long-Term Complications Admission Rate X PQI 03: Diabetes Long-Term Complicati													X					V		
73 0275 AHRQ PQI05 PQI 05: COPD or Asthma in Older Adults Admission Rate PQI 05: COPD or Asthma in Older Adults Admission Rate X N N N N N N N N N N N N N N N N N N												<u> </u>	X					X		
74 0270 Affixed PQI 07. Hypertension Admission Rate X			**	**									X					X		
76 NA AHRQ PQI 14: Uncontrolled Diabetes Admission Rate* PQI 14: Uncontrolled Diabetes Admission Rate X PQI 14: Uncontr	NA AHRQ	PQI14		PQI 14: Uncontrolled Diabetes Admission Rate	2022		1.93						Х		Х		X	Х		
77 0283 AHRQ PQI15 PQI 15: Asthma in Younger Adults Admission Rate PQI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Younger Adults Admission Rate X DI 15: Asthma in Y	0283 AHRQ	PQI15	PQI 15: Asthma in Younger Adults Admission Rate	PQI 15: Asthma in Younger Adults Admission Rate	2022	2.58	2.48					Every Year	Х		X		X	X		

				Appen	dix I: Hawai	ii Med-QUEST (Quality Strategy Perfo	ormance I	Measures,	Baseline an	d Targ	ets															
NQF/CBE ID #	Measure	PM Code	Performance Measure (PM) Name	PM Indicator	Baseline Reporting	Baseline (Value)	RY2026 Target/	Quality Strategy Objectives Addressed Reporting							Reporting Requir (RY2024)	Reporting Requirements (RY2025)		nents	ents Reporting Requirements (RY2026)			Reporting	Agencies/I	encies/Facilities			
Stewaru	Steward				Year (RY)	[STATEWIDE]	Target Setting Method	1 2 3	4 5 6	7 8 9 10	0 11 1	2 13 14 15	16 17 Cycle	Repo	orted to P4P	Audited by HSAG	y Reported to MQD	P4P	Audited by Repo	orted to P4P	Audited by HSAG	QI Plans	CCS Plan Hosp	Nursin Facilitie		D S	
NA	NCQA	AAP	Adults' Access to Preventive/Ambulatory Health Services	Adults' Access to Preventive/Ambulatory Health Services (Total)	2022	71.46%	74.32%						Every Y	ear	Х		Х			Χ		Χ					
0285	AHRQ	PQI16	PQI 16: Lower-Extremity Amputation Among Patients with Diabetes Admission Rate	PQI 16: Lower-Extremity Amputation Among Patients with Diabetes Admission Rate	2022	4.51	4.33						Every Y	ear	Х		Х			х		х					
NA NA	AHRQ	PQI-92	PQI 92: Chronic Conditions Composite *	PQI 92: Chronic Conditions Composite	2022	88.41	84.87						Every Y	ear	Х		Х			Х		Х					
) NA	CMS	LTSS-AIF	LTSS Admission to an Institution from the Community	Short Term Stay	2022	34.78	36.17	 				X	Every Y		Х		Х			Х		Х			$\overline{}$	#	
. NA	CMS	LTSS-AIF	LTSS Admission to an Institution from the Community	Medium-Term Stay	2022	7.27	7.56					X	Every Y		X		X			X		X					
. NA	CMS	LTSS-AIF	LTSS Admission to an Institution from the Community	Long-Term Stay	2022	3.85	4.00					X	Every Y		X		X			X		Х					
NA NA	CMS	LTSS-CAU	LTSS Comprehensive Assessment and Update	Assessment of Core Elements	2022	18.73%	19.48%					X	Every Y		Х		Х			Х		Х					
NA NA	CMS	LTSS-CAU	LTSS Comprehensive Assessment and Update	Assessment of Supplemental Elements	2022	17.19%	17.88%					X	Every Y	ear	Х		Х			Х		Χ					
NA NA	CMS	LTSS-CPU	LTSS Comprehensive Care Plan and Update	Assessment of Core Elements	2022	9.92%	10.32%					X	Every Y	ear	Х Х		X			Х		Χ					
i NA	CMS	LTSS-CPU	LTSS Comprehensive Care Plan and Update	Assessment of Supplemental Elements	2022	9.92%	10.32%					Х	Every Y	ear	X		Х			X		X					
' NA	CMS	LTSS-ILOS	LTSS Minimizing Institutional Length of Stay	Observed Rate	2022	17.02%	17.70%					X	Every Y	ear	Х		Х			Χ		Χ					
NA NA	CMS	LTSS-ILOS	LTSS Minimizing Institutional Length of Stay	Risk-adjusted Rate	2022	0.5379	55.94%					X	Every Y	ear	Χ		Х			Χ		Χ					
NA NA	CMS	LTSS-PCP	LTSS Shared Care Plan with Primary Care Practitioner	LTSS Shared Care Plan with Primary Care Practitioner	2022	18.40%	19.14%					×	Every Y	ear	Χ		X			Χ		Χ					
NA NA	CMS	LTSS-TRAN	LTSS Successful Transition After Long-Term Institutional Stay	Observed Rate	2022	68.48%	71.22%					X	Every Y	ear	X		X			Χ		Χ					
NA	CMS	LTSS-TRAN	LTSS Successful Transition After Long-Term Institutional Stay	Risk-adjusted Rate	2022	1.0528	1.0949					X	Every Y	ear	X		X			X		Χ					
NA	CMS	LTSS-UAD	LTSS Re-Assessment/Care Plan Update After Inpatient Discharge	Reassessment after Inpatient Discharge	2022	10.63%	11.06%					X	Every Y	ear	Χ		X			Χ		Χ					
NA	CMS	LTSS-UAD	LTSS Re-Assessment/Care Plan Update After Inpatient Discharge	Reassessment and Care Plan after Inpatient Discharge	2022	1.31%	1.36%					X	Every Y	ear	X		X			X		Χ					
0006	AHRQ	CAHPS 5.1H	Composite Measure: Getting Needed Care	Composite Measure: Getting Needed Care (CHIP)	2023	78.90%	81.27%						Every Y	ear	Х		Х			X					Х		
0006	AHRQ	CAHPS 5.1H	Composite Measure: Getting Needed Care	Composite Measure: Getting Needed Care (Adults)	2022	79.20%	82.37%						Even ye		Х					Χ					X		
0006	AHRQ	CAHPS 5.1H	Composite Measure: Getting Needed Care	Compostite Measure: Getting Needed Care (Child)	2023	76.60%	78.90%						Odd ye				Х								X	4	
0006	AHRQ	CAHPS 5.1H	Composite Measure: Getting Care Quickly	Composite Measure: Getting Care Quickly (CHIP)	2023	78.50%	80.86%						Every Y	ear	Х		X			Х					X		
0006	AHRQ	CAHPS 5.1H	Composite Measure: Getting Care Quickly	Composite Measure: Getting Care Quickly (Adults)	2022	75.80%	78.83%						Even ye		Х					Х					X	4	
0006	AHRQ	CAHPS 5.1H	Compostite Measure: Getting Care Quickly	Composite Measure: Getting Care Quickly (Child)	2023	79.70%	82.09%						Odd ye				X								X		
0006	AHRQ	CAHPS 5.1H	Composite Measure: How Well Doctors Communicate	Composite Measure: How Well Doctors Communicate (CHIP)	2023	95.60%	98.47%						Every Y		X		X			X					X		
L 0006	AHRQ	CAHPS 5.1H	Composite Measure: How Well Doctors Communicate	Composite Measure: How Well Doctors Communicate (Adults)	2022	90.60%	94.22%						Even ye		Х					X					X		
2 0006	AHRQ	CAHPS 5.1H	Composite Measure: How Well Doctors Communicate	Composite Measure: How Well Doctors Communicate (Child)	2023	93.40%	96.20%		 		+ +		Odd ye				X			V				-	X	-	
0006	AHRQ	CAHPS 5.1H	Composite Measure: Customer Service	Composite Measure: Customer Service (CHIP)	2023	89.10%	91.77%				+ +		Every Y		X		X			X				$\overline{}$	X	-	
4 0006 5 0006	AHRQ	CAHPS 5.1H	Composite Measure: Customer Service	Composite Measure: Customer Service (Adults)	2022	84.70%	88.09%				+ +		Even ye		Х					X				$\overline{}$	X		
0006	AHRQ	CAHPS 5.1H	Composite Measure: Customer Service	Composite Measure: Customer Service (Child)	2023	86.90%	89.51%		+ + + +				Odd ye		V		X			V				-	X	\vdash	
6 0006 7 0006	AHRQ	CAHPS 5.1H	Individual Measures: Coordination of Care	Individual Measures: Coordination of Care (CHIP)	2023	87.00%	89.61%				+ +		Every Y		X					X				$\overline{}$	X	+	
	AHRQ AHRQ	CAUPS 5.1H	Individual Measures: Coordination of Care	Individual Measures: Coordination of Care (Adults)	2022	81.70%	84.97%		+ + + +		+ +		Even ye Odd ye		X					X				$\overline{}$	X	\overline{A}	
0006	AHRQ	CAHPS 5.1H CAHPS 5.1H	Individual Measures: Coordination of Care Global Rating Measure: Rating of Health Plan	Individual Measures: Coordination of Care (Child) Global Rating Measure: Rating of Health Plan (CHIP)	2023	85.40% 75.40%	87.96% 77.66%		+ + + +		+ +		Every Y		V		X			v .				$\overline{}$	X		
0006	AHRQ	CAHPS 5.1H		Global Rating Measure: Rating of Health Plan (CHIP) Global Rating Measure: Rating of Health Plan (Adults)	2023	61.60%	64.06%			- - -	++		Every Y		Λ Υ		^			Y						H	
0006	AHRQ	CAHPS 5.1H	Global Rating Measure: Rating of Health Plan	Global Rating Measure: Rating of Health Plan (Child)	2022	73.40%	75.60%			- - 	+ +		Odd ye		^		X			^						H	
0006	AHRQ	CAHPS 5.1H	Global Rating Measure: Rating of All Health Care	Global Rating Measure: Rating of All Health Care (CHIP)	2023	65.50%	67.47%		+ + +	- 	++	+ + +	Every Y		X		X			X					X	$\boldsymbol{\mathcal{A}}$	
0006	AHRQ	CAHPS 5.1H	Global Rating Measure: Rating of All Health Care	Global Rating Measure: Rating of All Health Care (Adults)	2023	58.40%	60.74%			- 	++		Even ye		X		^			X					X	-	
0006	AHRQ	CAHPS 5.1H	Global Rating Measure: Rating of All Health Care	Global Rating Measure: Rating of All Health Care (Child)	2022	68.80%	70.86%			- 	++		Odd ye		Λ		X			A					X		
0006	AHRQ	CAHPS 5.1H	Global Rating Measure: Rating of An Health Care Global Rating Measure: Rating of Specialist Seen Most Often	Global Rating Measure: Rating of Specialist Seen Most Often (CHIP)	2023	76.70%	79.00%		 	- 	++		Every Y		X		X			X					X		
0006	AHRQ	CAHPS 5.1H	Global Rating Measure: Rating of Specialist Seen Most Often	Global Rating Measure: Rating of Specialist Seen Most Often (Adults)	2023	70.10%	73.00%	+ + +	 	- - - - - - - - - 	+ +		Even ye		X		Α			X					Y	Ħ	
7 0006	AHRQ	CAHPS 5.1H	Global Rating Measure: Rating of Specialist Seen Most Often	Global Rating Measure: Rating of Specialist Seen Most Often (Addits)	2023	75.40%	77.66%	+ + +	 	- 	++		Odd ye		^		X			Δ					X	H	
8 0006	AHRQ	CAHPS 5.1H	Global Rating Measure: Rating of Specialist Seen Most Orten	Global Rating Measure: Rating of Personal Doctor (CHIP)	2023	77.70%	80.03%		 	- 	++		Every Y		Y		X			Y					V		
	AHRQ				2023						+			_	Λ V		^			^ v							
0006	AHRQ	CAHPS 5.1H CAHPS 5.1H		Global Rating Measure: Rating of Personal Doctor (Adults) Global Rating Measure: Rating of Personal Doctor (Child)	2022	65.10% 78.50%	67.70% 80.86%						Even ye Odd ye		٨					۸					X		

Indicates a measure was not reported or audited.

[▼] Indicates an inverse measure. A lower rate indicates better performance.

NA Indicates that a data element was not applicable to the measure (i.e., no NQF number available, etc.).

NQ Indicates the measure is not required to be submitted to the MQD during the reporting year.

NV Indicates a measure was not available during the measurement year.

¹ Measure was audited for the CCS program only.