



# Quick Reference Guide HEDIS<sup>®</sup> MY 2022



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# HEDIS<sup>®</sup> MY 2022

## Quick Reference Guide

Updated to reflect NCQA HEDIS<sup>®</sup> MY 2022 Technical Specifications

Arkansas Health & Wellness strives to provide quality healthcare to our membership as measured through HEDIS quality metrics. We created the HEDIS MY 2022 Quick Reference Guide to help you increase your practice's HEDIS rates and to use to address care opportunities for your patients. Please always follow the state and/or CMS billing guidance and ensure the HEDIS codes are covered prior to submission.



### **WHAT IS HEDIS<sup>®</sup>?**

HEDIS (Healthcare Effectiveness Data and Information Set) is a set of standardized performance measures developed by the National Committee for Quality Assurance (NCQA) to objectively measure, report, and compare quality across health plans. NCQA develops HEDIS measures through a committee represented by purchasers, consumers, health plans, health care providers, and policy makers.

### **WHAT ARE THE SCORES USED FOR?**

As state and federal governments move toward a quality-driven healthcare industry, HEDIS rates are becoming more important for both health plans and individual providers. State purchasers of healthcare use aggregated HEDIS rates to evaluate health insurance companies' efforts to improve preventive health outreach for members.

Physician-specific scores are also used to measure your practice's preventive care efforts. Your practice's HEDIS score determines your rates for physician incentive programs that pay you an increased premium — for example, Pay For Performance or Quality Bonus Funds.

## HOW ARE RATES CALCULATED?

HEDIS rates can be calculated in two ways: administrative data or hybrid data. Administrative data consists of claim or encounter data submitted to the health plan. Hybrid data consists of both administrative data and a sample of medical record data. Hybrid data requires review of a random sample of member medical records to abstract data for services rendered but that were not reported to the health plan through claims/encounter data. Accurate and timely claim/encounter data reduces the need for medical record review. If services are not billed or not billed accurately, they are not included in the calculation.

## HOW CAN I IMPROVE MY HEDIS® SCORES?

- Submit claim/encounter data for each and every service rendered.
- Make sure that chart documentation reflects all services billed.
- Bill (or report by encounter submission) for all delivered services, regardless of contract status.
- Ensure that all claim/encounter data is submitted in an accurate and timely manner.
- Consider including CPT® II codes to provide additional details and reduce medical record requests.



This guide has been updated with information from the release of the HEDIS® MY 2022 Volume 2 Technical Specifications by NCQA and is subject to change.



For more information, visit [www.ncqa.org](http://www.ncqa.org)

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# ADULT HEALTH

## (AAP) ADULTS' ACCESS TO PREVENTIVE/AMBULATORY HEALTH SERVICES

Measure evaluates the percentage of members 20 years and older who had an ambulatory or preventive care visit. Services that count include outpatient evaluation and management (E&M) visits, consultations, assisted living/home care oversight, preventive medicine, and counseling.

CPT*	HCPCS	ICD-10
99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99429, 92002, 92004, 92012, 92014, 99201-99205, 99211-99215, 99241-99245, 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99441-99443, 98969, 98970, 98971, 98972, 99421, 99422, 99423, 99444, 99457, 99483	G0071, G0402, G0438, G0439, G0463, G2010, G2012, G2061, G2062, G2063, T1015, S0620, S0621	Z00.00, Z00.01, Z00.5, Z00.8, Z02.0, Z02.1, Z02.2, Z02.3, Z02.4, Z02.5, Z02.6, Z02.71, Z02.79, Z02.81, Z02.82, Z02.83, Z02.89, Z02.9, Z76.1, Z76.2

\*Codes subject to change



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## (AMM) ANTIDEPRESSANT MEDICATION MANAGEMENT

Measure evaluates percentage of members 18 years of age and older who were treated with antidepressant medication, had a diagnosis of major depression, and who remained on an antidepressant medication treatment. Two rates are reported:

- **Effective Acute Phase Treatment:** Percentage of members who remained on an antidepressant medication for at least 84 days (12 weeks).
- **Effective Continuation Phase Treatment:** Percentage of members who remained on an antidepressant medication for at least 180 days (6 months).

### Antidepressant Medications

DESCRIPTION	PRESCRIPTION
Miscellaneous antidepressants	· Bupropion      · Vilazodone      · Vortioxetine
Monoamine oxidase inhibitors	· Isocarboxazid      · Selegiline      · Phenelzine · Tranylcypromine
Phenylpiperazine antidepressants	· Nefazodone      · Trazodone
Psychotherapeutic combinations	· Amitriptyline-chlordiazepoxide      · Fluoxetine-olanzapine · Amitriptyline-perphenazine
SNRI antidepressants	· Desvenlafaxine      · Duloxetine      · Venlafaxine · Levomilnacipran
SSRI antidepressants	· Citalopram      · Escitalopram      · Fluoxetine · Fluvoxamine      · Paroxetine      · Sertraline
Tetracyclic antidepressants	· Maprotiline      · Mirtazapine
Tricyclic antidepressants	· Amitriptyline      · Amoxapine      · Clomipramine · Desipramine      · Doxepin (>6 mg)      · Imipramine · Nortriptyline      · Protriptyline      · Trimipramine

\*Codes subject to change



## (CBP) CONTROLLING HIGH BLOOD PRESSURE

Measure evaluates the percentage of members 18–85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90 mm Hg).

DESCRIPTION	CODES
<b>Hypertension</b>	<b>ICD-10:</b> I10
<b>Systolic ≥ 140</b>	<b>CPT-CAT-II:</b> 3077F
<b>Systolic &lt; 140</b>	<b>CPT-CAT-II:</b> 3074F, 3075F
<b>Diastolic ≥ 90</b>	<b>CPT-CAT-II:</b> 3080F
<b>Diastolic 80–89</b>	<b>CPT-CAT-II:</b> 3079F
<b>Diastolic &lt; 80</b>	<b>CPT-CAT-II:</b> 3078F
<b>Remote Blood Pressure Monitoring</b>	<b>CPT:</b> 93784, 93788, 93790, 99091, 99453, 99454, 99457, 99473, 99474
<b>Outpatient Visits</b>	<b>CPT:</b> 99201-99205, 99211-99215, 99241-99245, 99347-99350, 99381-99387, 99391-99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, 99455, 99456, 99483 <b>HCPCS:</b> G0402, G0438, G0439, G0463, T1015
<b>Non-Acute Inpatient Visits</b>	<b>CPT:</b> 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337
<b>Online Assessments</b>	<b>CPT:</b> 98969-98972, 99421-99423, 99444, 99457 <b>HCPCS:</b> G0071, G2010, G2012, G2061, G2062, G2063
<b>Telephone Visits</b>	<b>CPT:</b> 98966-98968, 99441-99443
<b>Palliative Care</b>	<b>HCPCS:</b> G9054, M1017 <b>ICD-10:</b> Z51.5

\*Codes subject to change



**(BPD) BLOOD PRESSURE CONTROL FOR PATIENTS WITH DIABETES**

Measure evaluates the percentage of members 18-75 years of age with diabetes (types 1 and 2) whose blood pressure was adequately controlled (< 140/90 mm Hg) during the measurement year.

DESCRIPTION	CODES
<b>Palliative Care</b>	<b>HCPCS:</b> G9054, M1017 <b>ICD-10:</b> Z51.5
<b>Outpatient</b>	<b>CPT:</b> 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347- 99350, 99381-99387, 99391-99397, 99401-99404, 99411-99412, 99429, 99455-99456, 99483 <b>HCPCS:</b> G0402, G0438, G0439, G0463, T1015
<b>Non-Acute Inpatient</b>	<b>CPT:</b> 99304-99310, 99315-99316, 99318, 99324-99328, 99334-99337
<b>Telehealth/Telephone</b>	<b>CPT:</b> 99304-99310, 99315-99316, 99318, 99324-99328, 99334-99337
<b>Systolic ≥ 140</b>	<b>CPT-CAT-II:</b> 3077F
<b>Systolic &lt; 140</b>	<b>CPT-CAT-II:</b> 3074F, 3075F
<b>Diastolic ≥ 90</b>	<b>CPT-CAT-II:</b> 3080F
<b>Diastolic &lt; 80</b>	<b>CPT-CAT-II:</b> 3078F

\*Codes subject to change



**(HBD) HbA1c CONTROL FOR PATIENTS WITH DIABETES**

Measure evaluates the percentage of members 18-75 years of age with diabetes (types 1 and 2) whose HbA1c was at the following levels during the measurement year:

- HbA1c control (< 8%)
- HbA1c poor control (> 9%)

DESCRIPTION	CODES
<b>HbA1c Level &gt; 7</b>	<b>CPT-CAT-II:</b> 3044F
<b>HbA1c &gt; 9</b>	<b>CPT-CAT-II:</b> 3046F
<b>HbA1c Level ≥ 7 and &lt; 8</b>	<b>CPT-CAT-II:</b> 3051F
<b>HbA1c Level ≥ 8 and ≤ 9</b>	<b>CPT-CAT-II:</b> 3052F





## (EED) EYE EXAM PATIENTS WITH DIABETES

Measure evaluates the percentage of members 18-75 years of age with diabetes (types 1 and 2) who had a retinal eye exam.

DESCRIPTION	CODES
<b>Palliative Care</b>	<b>HCPCS:</b> G9054, M1017 <b>ICD-10:</b> Z51.5
<b>Outpatient</b>	<b>CPT:</b> 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347- 99350, 99381-99387, 99391-99397, 99401-99404, 99411-99412, 99429, 99455-99456, 99483 <b>HCPCS:</b> G0402, G0438, G0439, G0463, T1015
<b>Non-Acute Inpatient</b>	<b>CPT:</b> 99304-99310, 99315-99316, 99318, 99324-99328, 99334-99337
<b>Telehealth/Telephone</b>	<b>CPT:</b> 98966-98968, 99441-99443
<b>Eye Exam With Evidence of Retinopathy</b>	<b>CPT-CAT-II:</b> 2022F, 2024F, 2026F
<b>Eye Exam Without Evidence of Retinopathy</b>	<b>CPT-CAT-II:</b> 2023F, 2025F, 2033F
<b>Unilateral Eye Enucleation</b>	<b>CPT:</b> 65091, 65093, 65101, 65103, 65105, 65110, 65112, 65114



## (COA) CARE FOR OLDER ADULTS

Measure evaluates percentage of adults 66 years and older who had each of the following:

- Medication review.
- Functional status assessment.
- Pain assessment.

DESCRIPTION	CODES
<b>Medication Review Would need both CPT-CAT II codes to get credit. 1159F (Medication List) &amp; 1160F (Medication Review)</b>	<b>CPT:</b> : 90863, 99605, 99606, 99483 <b>CPT-CAT-II:</b> 1159F, 1160F
<b>Functional Status Assessment</b>	<b>CPT:</b> 99483 <b>CPT-CAT-II:</b> 1170F <b>HCPCS:</b> G0438, G0439
<b>Pain Assessment</b>	<b>CPT-CAT-II:</b> 1125F, 1126F

\*Codes subject to change



**(COL) COLORECTAL CANCER SCREENING**

Measure evaluates the percentage of members 50–75 years of age who had an appropriate screening for colorectal cancer.

DESCRIPTION	CODES
<b>Colonoscopy</b>	<b>CPT:</b> 44388-44394, 44397, 44401-44408, 45355, 45378-45393, 45398 <b>HCPCS:</b> G0105, G0121
<b>CT Colonography</b>	<b>CPT:</b> 74261-74263
<b>FIT- DNA Lab Test</b>	<b>CPT:</b> 81528
<b>Flexible Sigmoidoscopy</b>	<b>CPT:</b> 45330-45335, 45337-45338, 45340-45342, 45346-45347, 45349-45350 <b>HCPCS:</b> G0104
<b>FOBT Lab Test</b>	<b>CPT:</b> 82270, 82274 <b>HCPCS:</b> G0328
<b>Colorectal Cancer</b>	<b>HCPCS:</b> G0213, G0214, G0215, G0231 <b>ICD-10:</b> C18.0-C18.9, C19, C20, C21.2, C21.8, C78.5, Z85.038, Z85.048
<b>Palliative Care</b>	<b>HCPCS:</b> G9054, M1017 <b>ICD-10:</b> Z51.5
<b>Total Colectomy</b>	<b>CPT:</b> 44150-44153, 44155-44158, 44210-44212

\*Codes subject to change



**(KED) KIDNEY HEALTH EVALUATION FOR PATIENTS WITH DIABETES**

Measure evaluates the percentage of members 18–85 years of age with diabetes (types 1 and 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.

DESCRIPTION	CODES
<b>Estimated Glomerular Filtration Rate (eGFR)</b>	<b>CPT:</b> 80047, 80048, 80050, 80053, 80069, 82565
<b>Urine Albumin-Creatinine Ratio (uACR)</b>	<b>CPT:</b> 82043, 82570
<b>Palliative Care</b>	<b>HCPCS:</b> G9054, M1017 <b>ICD-10:</b> Z51.5

\*Codes subject to change



## (PBH) PERSISTENCE OF BETA-BLOCKER TREATMENT AFTER A HEART ATTACK

Measure demonstrates the percentage of members 18 years and older during the measurement year who were hospitalized and discharged from July 1 of the year prior to June 30 of the measurement year with a diagnosis of AMI, and who received persistent beta-blocker treatment for six months after discharge.

### Beta-Blocker Medications

DESCRIPTION	PRESCRIPTION
<b>Noncardioselective Beta-Blockers</b>	<ul style="list-style-type: none"> <li>· Carvedilol</li> <li>· Pindolol</li> <li>· Sotalol</li> <li>· Labetalol</li> <li>· Propranolol</li> <li>· Nadolol</li> <li>· Timolol</li> </ul>
<b>Cardioselective Beta-Blockers</b>	<ul style="list-style-type: none"> <li>· Acebutolol</li> <li>· Atenolol</li> <li>· Betaxolol</li> <li>· Bisoprolol</li> <li>· Metoprolol</li> <li>· Nebivolol</li> </ul>
<b>Antihypertensive Combinations</b>	<ul style="list-style-type: none"> <li>· Atenolol-chlorthalidone</li> <li>· Bendroflumethiazide-nadolol</li> <li>· Bisoprolol-hydrochlorothiazide</li> <li>· Hydrochlorothiazide-metoprolol</li> <li>· Hydrochlorothiazide-propranolol</li> </ul>

\*Codes subject to change



## (PCE) PHARMACOTHERAPY MANAGEMENT OF COPD EXACERBATION

Measure evaluates the percentage of COPD exacerbations for members 40 years and older who had an acute inpatient discharge or ED visit on or between January 1 and November 30 and were dispensed appropriate medications. Two rates are reported:

- 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.**

### Systemic Corticosteroid Medications

DESCRIPTION	PRESCRIPTION
<b>Glucocorticoids</b>	<ul style="list-style-type: none"> <li>· Cortisone-acetate</li> <li>· Dexamethasone</li> <li>· Hydrocortisone</li> <li>· Methylprednisolone</li> <li>· Prednisolone</li> <li>· Prednisone</li> </ul>

\*Codes subject to change

**(PCE) PHARMACOTHERAPY MANAGEMENT OF COPD EXACERBATION (CONTINUED)**

**Bronchodilator Medications**

DESCRIPTION	PRESCRIPTION
<b>Anticholinergic Agents</b>	<ul style="list-style-type: none"> <li>· Acclidinium-bromide</li> <li>· Ipratropium</li> <li>· Umeclidinium</li> <li>· Tiotropium</li> </ul>
<b>Beta 2-Agonists</b>	<ul style="list-style-type: none"> <li>· Albuterol</li> <li>· Arformoterol</li> <li>· Formoterol</li> <li>· Indacaterol</li> <li>· Levalbuterol</li> <li>· Metaproterenol</li> <li>· Salmeterol</li> <li>· Olodaterol hydrochloride</li> </ul>
<b>Bronchodilator Combinations</b>	<ul style="list-style-type: none"> <li>· Albuterol-ipratropium</li> <li>· Budesonide-formoterol</li> <li>· Formoterol-mometasone</li> <li>· Indacaterol-glycopyrrolate</li> <li>· Umeclidinium-Vilanterol</li> <li>· Fluticasone furoate - umeclidinium-vilarterol</li> <li>· Formoterol-acclidinium</li> <li>· Formoterol-glycopyrrolate</li> <li>· Fluticasone-salmeterol</li> <li>· Fluticasone-vilanterol</li> <li>· Olodaterol-tiotropium</li> </ul>

\*Codes subject to change



**(SMD) DIABETES MONITORING FOR PEOPLE WITH DIABETES AND SCHIZOPHRENIA**

Measure evaluates the percentage of members 18–64 years of age with schizophrenia or schizoaffective disorder and diabetes who had both an LDL-C test and an HbA1c test.

DESCRIPTION	CODES
<b>HbA1C Lab Tests</b>	<p><b>CPT:</b> 83036, 83037</p> <p><b>CPT-CAT-II:</b> 3044F, 3046F, 3051F, 3052F</p>
<b>LDL-C Lab Tests</b>	<p><b>CPT:</b> 80061, 83700, 83701, 83704, 83721</p> <p><b>CPT-CAT-II:</b> 3048F, 3049F, 3050F</p>

\*Codes subject to change



**(SPR) USE OF SPIROMETRY TESTING IN THE ASSESSMENT AND DIAGNOSIS OF COPD**

Measure evaluates the percentage of members 40 years and older with a new diagnosis of COPD or newly active COPD, who received appropriate spirometry testing to confirm diagnosis.

CPT*
94010, 94014-94016, 94060, 94070, 94375, 94620

\*Codes subject to change



## **(SSD) DIABETES SCREENING FOR PEOPLE WITH SCHIZOPHRENIA OR BIPOLAR DISORDER WHO ARE USING ANTIPSYCHOTIC MEDICATIONS**

Measure evaluates the percentage of members 18–64 years of age with schizophrenia, schizoaffective disorder, or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test.

<b>DESCRIPTION</b>	<b>CODES</b>
<b>HbA1C Lab Tests</b>	<b>CPT:</b> 83036, 83037 <b>CPT-CAT-II:</b> 3044F, 3046F, 3051F, 3052F
<b>Glucose Lab Tests</b>	<b>CPT:</b> 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951

\*Codes subject to change





# WOMEN'S HEALTH

## (BCS) BREAST CANCER SCREENING

Measure evaluates the percentage of patients 50–74 years of age who had a mammogram to screen for breast cancer.

DESCRIPTION	CODES
<b>Mammogram</b>	<b>CPT:</b> 77061-77063, 77065-77067 <b>ICD-10 (bilateral mastectomy):</b> Z90.13
<b>Palliative Care</b>	<b>HCPCS:</b> G9054, M1017 <b>ICD-10:</b> Z51.5

\*Codes subject to change



## (CCS) CERVICAL CANCER SCREENING

Measure demonstrates the percentage of patients 21–64 years of age who were screened for cervical cancer using **any** of the following criteria:

- Patients ages 21–64 who had cervical cytology performed within last three years.
- Patients ages 30–64 who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last five years.
- Patients ages 30–64 who had cervical cytology/hrHPV co-testing within the last five years.



**(CCS) CERVICAL CANCER SCREENING (CONTINUED)**

DESCRIPTION	CODES
<b>Cervical Cytology Lab Test (20–64)</b>	<b>CPT:</b> 88141-88143, 88147, 88148, 88150, 88164-88167, 88174, 88175 <b>HCPCS:</b> G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091
<b>HPV Tests (30–64)</b>	<b>CPT:</b> 87624, 87625 <b>HCPCS:</b> G0476
<b>Hysterectomy with No Residual Cervix and Absence of Cervix Diagnosis</b>	<b>CPT:</b> 51925, 56308, 57530, 57531, 57540, 57545, 57550, 57555, 57556, 58150, 58152, 58200, 58210, 58240, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58285, 58290-58294, 58548, 58550, 58552-58554, 58570-58573, 58575, 58951, 58953, 58954, 58956, 59135 <b>ICD-10:</b> Q51.5, Z90.710
<b>Palliative Care</b>	<b>HCPCS:</b> G9054, M1017 <b>ICD-10:</b> Z51.5

\*Codes subject to change



**(CHL) CHLAMYDIA SCREENING**

Measure evaluates the percentage of patients 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia.

CPT*
87110, 87270, 87320, 87490-87492, 87810

\*Codes subject to change



**(OMW) OSTEOPOROSIS MANAGEMENT IN PATIENTS WHO HAD A FRACTURE**

Measure evaluates the percentage of patients 67–85 years of age who suffered a fracture and who had either a bone mineral density test or prescription for a drug to treat osteoporosis in the six months following the fracture.

DESCRIPTION	CODES
<b>Palliative Care</b>	<b>HCPCS:</b> G9054, M1017 <b>ICD-10:</b> Z51.5
<b>Bone Mineral Density Tests</b>	<b>CPT:</b> 76977, 77078, 77080, 77081, 77085, 77086
<b>Osteoporosis Medications</b>	<b>HCPCS:</b> J0897, J1740, J3110, J3111, J3489
<b>Long-Acting Osteoporosis Medications during Inpatient Stay</b>	<b>HCPCS:</b> J0897, J1740, J3489

\*Codes subject to change

**(OMW) OSTEOPOROSIS MANAGEMENT IN PATIENTS WHO HAD A FRACTURE (CONTINUED)**

**Osteoporosis Medications**

DESCRIPTION	PRESCRIPTION
<b>Bisphosphonates</b>	<ul style="list-style-type: none"> <li>· Alendronate</li> <li>· Alendronate-cholecalciferol</li> <li>· Ibandronate</li> <li>· Risedronate</li> <li>· Zoledronic acid</li> </ul>
<b>Other Agents</b>	<ul style="list-style-type: none"> <li style="width: 50%;">· Abaloparatide</li> <li style="width: 50%;">· Romosozumab</li> <li style="width: 50%;">· Denosumab</li> <li style="width: 50%;">· Teriparatide</li> <li style="width: 50%;">· Raloxifene</li> </ul>

\*Codes subject to change



**(OSW) OSTEOPOROSIS SCREENING IN OLDER PATIENTS**

Measure evaluates the percentage of patients 65–75 years of age who received an osteoporosis screening.

DESCRIPTION	CODES
<b>Osteoporosis Screening Tests</b>	<b>CPT:</b> 76977, 77078, 77080, 77081, 77085
<b>Palliative Care</b>	<b>HCPCS:</b> G9054, M1017 <b>ICD-10:</b> Z51.5

\*Codes subject to change



**(PPC) PRENATAL AND POSTPARTUM CARE**

Measure evaluates 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 patients, the measure assesses the following facets of prenatal and postpartum care.

- **Timeliness of Prenatal Care:** 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:** Percentage of deliveries that had a postpartum visit on or between 7 and 84 days after delivery.



**(PPC) PRENATAL AND POSTPARTUM CARE (CONTINUED)**

DESCRIPTION	CODES
<b>Online Assessments</b>	<b>CPT:</b> 98969-98972, 99421-99423, 99444, 99457 <b>HCPCS:</b> G0071, G2010, G2012, G2061, G2062, G2063
<b>Prenatal Visits</b>	<b>CPT:</b> 99201-99205, 99211-99215, 99241-99245, 99483 <b>HCPCS:</b> G0463, T1015
<b>Stand-Alone Prenatal Visits</b>	<b>CPT:</b> 99500 <b>CPT-CAT-II:</b> 0500F, 0501F, 0502F <b>HCPCS:</b> H1000, H1001, H1002, H1003, H1004
<b>Cervical Cytology Lab Test</b>	<b>CPT:</b> 88141-88143, 88147, 88148, 88150, 88152-88154, 88164-88167, 88174, 88175 <b>HCPCS:</b> G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091
<b>Postpartum Visits</b>	<b>CPT:</b> 57170, 58300, 59430, 99501 <b>CPT-CAT-II:</b> 0503F <b>HCPCS:</b> G0101 <b>ICD-10:</b> Z01.411, Z01.419, Z01.42, Z30.430, Z39.1, Z39.2
<b>Telephone Visits</b>	<b>CPT:</b> 98966-98968, 99441-99443

\*Codes subject to change

NOTE: When using the Online Assessment, Telephone Visit, or Prenatal Visit codes, remember to also include a Pregnancy Diagnosis code.





# PEDIATRIC HEALTH

## **(ADD) FOLLOW-UP CARE FOR CHILDREN PRESCRIBED ADHD MEDICATION**

Measure evaluates 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. Two rates are reported:

- **Initiation Phase:** Percentage of members 6–12 years old as of the IPSD with an ambulatory prescription dispensed for ADHD medication, who had one follow-up visit with practitioner with prescribing authority during the 30-day Initiation Phase.
- **Continuation and Maintenance (C&M) Phase:** Percentage of members 6–12 years old as of the IPSD with an ambulatory 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 (9 months) of the Initiation Phase.

**(ADD) FOLLOW-UP CARE FOR CHILDREN PRESCRIBED ADHD MEDICATION (CONTINUED)**

DESCRIPTION	CODES
<b>Outpatient Visit</b>	<b>CPT:</b> 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 <b>POS:</b> 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 71, 72
<b>BH Outpatient Visit</b>	<b>CPT:</b> 98960-98962, 99078, 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99510, 99483 <b>HCPCS:</b> G0155, G0176, G0177, G0409, G0463, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, T1015
<b>Observation Visit</b>	<b>CPT:</b> 99217-99220
<b>Health and Behavior Assessment/Intervention</b>	<b>CPT:</b> 96150-96154, 96156, 96158, 96159, 96164, 96165, 96167, 96168, 96170, 96171
<b>Visit Setting Unspecified Value Set with Partial Hospitalization POS</b>	<b>CPT:</b> 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 <b>POS:</b> 52
<b>Partial Hospitalization/ Intensive Outpatient</b>	<b>HCPCS:</b> G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485
<b>Telehealth Visit</b>	<b>CPT:</b> 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 <b>POS:</b> 02, 10
<b>Telephone Visits</b>	<b>CPT:</b> 98966-98968, 99441-99443
<b>E-visit/Virtual Check-In</b>	<b>CPT:</b> 98969-98972, 99421-99423, 99444, 99457 <b>HCPCS:</b> G2010, G2012, G2061, G2062, G2063
<b>Visit Setting Unspecified Value Set with Community Mental Health Center POS</b>	<b>CPT:</b> 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 <b>POS:</b> 53

\*Codes subject to change



## (APM) METABOLIC MONITORING FOR CHILDREN AND ADOLESCENTS ON ANTIPSYCHOTICS

Measure demonstrates the percentage of children and adolescents 1–17 years old who had two or more antipsychotic prescriptions and had metabolic testing. Three rates reported:

- Percentage of children and adolescents on antipsychotics who received blood glucose testing.
- Percentage of children and adolescents on antipsychotics who received cholesterol testing.
- Percentage of children and adolescents on antipsychotics who received blood glucose and cholesterol testing.

DESCRIPTION (NEED EITHER A1C OR GLUCOSE AND LCL-C OR CHOLESTEROL)	CODES
<b>HbA1C Lab Tests</b>	<b>CPT:</b> 83036, 83037 <b>CPT-CAT-II:</b> 3044F, 3046F, 3051F, 3052F
<b>Glucose Lab Tests</b>	<b>CPT:</b> 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951
<b>LDL-C Lab Tests</b>	<b>CPT:</b> 80061, 83700, 83701, 83704, 83721 <b>CPT-CAT-II:</b> 3048F, 3049F, 3050F
<b>Cholesterol Lab Tests</b>	<b>CPT:</b> 82465, 83718, 83722, 84478

\*Codes subject to change



## (CIS) CHILDHOOD IMMUNIZATION STATUS

Measure demonstrates the percentage of children 2 years of age who completed immunizations on or before their second birthday.

DESCRIPTION	CODES
<b>DTaP (4-dose)</b>	<b>CPT:</b> 90697, 90698, 90700, 90723 <b>CVX:</b> 20, 50, 106, 107, 110, 120, 146
<b>HIB (3-dose)</b>	<b>CPT:</b> 90644, 90647, 90648, 90698, 90748 <b>CVX:</b> 17, 46, 47, 48, 49, 50, 51, 120, 148
<b>Newborn Hep B (3-dose)</b>	<b>CPT:</b> 90697, 90723, 90740, 90744, 90747, 90748 <b>CVX:</b> 08, 44, 45, 51, 110 <b>HCPCS:</b> G0010
<b>IPV (3-dose)</b>	<b>CPT:</b> 90697, 90698, 90713, 90723 <b>CVX:</b> 10, 89, 110, 120, 146
<b>MMR (1-dose)</b>	<b>CPT:</b> 90707, 90710 <b>CVX:</b> 03, 94
<b>Pneumococcal Conjugate PCV (4-dose)</b>	<b>CPT:</b> 90670 <b>CVX:</b> 109, 133, 152 <b>HCPCS:</b> G0009
<b>Varicella VZV (1-dose)</b>	<b>CPT:</b> 90710, 90716 <b>CVX:</b> 21, 94
<b>Hep A (1-dose)</b>	<b>CPT:</b> 90633 <b>CVX:</b> 31, 83, 85
<b>Influenza Flu (2-dose)</b> LAIV vaccination must be administered on the child's second birthday.	<b>CPT:</b> 90655, 90657, 90661, 90673, 90674, 90685-90689, 90756 <b>CVX:</b> 88, 140, 141, 150, 153, 155, 158, 161, 171, 186 <b>HCPCS:</b> G0008
<b>Rotavirus (2-Dose)</b>	<b>CPT:</b> 90681 <b>CVX:</b> 119
<b>Rotavirus (3-Dose)</b>	<b>CPT:</b> 90680 <b>CVX:</b> 116, 122

\*Codes subject to change

NOTE: Rotavirus is either 2-dose **OR** 3-dose for compliancy.



**(IMA) IMMUNIZATIONS FOR ADOLESCENTS**

Measure evaluates the percentage of adolescents 13 years of age who completed immunizations on or before their 13th birthday.

DESCRIPTION	CODES
<b>Meningococcal -serogroup A,C,W, and Y: (1-dose)</b>	<b>CPT:</b> 90619, 90734 <b>CVX:</b> 108, 114, 136, 147, 167, 203
<b>Tdap (1-dose)</b>	<b>CPT:</b> 90715 <b>CVX:</b> 115
<b>HPV (2- or 3-dose series)</b>	<b>CPT:</b> 90649-90651 <b>CVX:</b> 62, 118, 137, 165

\*Codes subject to change



**(LSC) LEAD SCREENING IN CHILDREN**

Measure evaluates the percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday.

CPT*
83655

\*Codes subject to change



**(W30/WCV) WELL-CHILD AND ADOLESCENT WELL-CARE VISITS**

Measures evaluate the percentage of members within designated ages who had comprehensive well-care visit(s) as defined in each measure, with a PCP or an OB/GYN, during the measurement year.

**(W30) Well-Child Vists in the First 30 Months of Life:** Children who turned 15 months old and who had at least six well-child visits with a PCP prior to turning 15 months old.

Months of Life: The percentage of members who had the following number of well-child visits with a PCP during the last 15 months. The following rates are reported:

- 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 Ages 15–30 Months. Children who turned 30 months old during the measurement year: Two or more well-child visits.

CPT*	HCPCS	ICD-10
99381, 99382, 99391, 99392, 99461	G0438, G0439, S0302	Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z76.1, Z76.2

\*Codes subject to change

**(W30/WCV) WELL-CHILD AND ADOLESCENT WELL-CARE VISITS  
(CONTINUED)**

**(WCV) Child and Adolescent Well-Care Visits:** Members 3–21 years old who had a least one comprehensive well-care visit with a PCP or an OB/GYN.

CPT*	HCPCS	ICD-10
99382-99385, 99391-99395	G0438, G0439, S0302	Z00.00, Z00.01, Z00.121, Z00.129, Z00.2, Z00.3, Z02.5, Z76.2

\*Codes subject to change



**(WCC) WEIGHT ASSESSMENT AND COUNSELING FOR NUTRITION AND PHYSICAL ACTIVITY FOR CHILDREN/ADOLESCENTS**

Measure demonstrates the percentage of members 3–17 years old who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following:

- BMI Percentile
- Counseling for Nutrition
- Counseling for Physical Activity

DESCRIPTION	CODES
<b>BMI Percentile</b>	<b>ICD-10:</b> Z68.51, Z68.52, Z68.53, Z68.54
<b>Nutrition Counseling</b>	<b>CPT:</b> 97802-97804 <b>HCPCS:</b> G0270, G0271, G0447, S9449, S9452, S9470 <b>ICD-10:</b> Z71.3
<b>Physical Activity</b>	<b>HCPCS:</b> G0447, S9451 <b>ICD-10:</b> Z02.5, Z71.82

\*Codes subject to change





# GENERAL HEALTH

## (AMR) ASTHMA MEDICATION RATIO

Measure evaluates the percentage of members 5–64 years old who were identified as having persistent asthma and had a ratio of controller medications to total asthma medication of 0.50 or greater.

**Step 1:** For each member, count the units of asthma controller medications (Asthma Controller Medications List) dispensed during the measurement year.

**Step 2:** For each member, count the units of asthma reliever medications (Asthma Reliever Medications List) dispensed during the measurement year.

- For each member, sum the units calculated in steps 1 and 2 to determine the total units asthma medications.

- For each member, calculate ratio using the below:

- Units of Controller Medications/Units of Total Asthma Medications.

### **Asthma Controller Medications**

DESCRIPTION	PRESCRIPTIONS	MEDICATION LISTS	ROUTE
<b>Antiasthmatic Combinations</b>	Dyphylline-guaifenesin	Dyphylline-guaifenesin Medications List	Oral
<b>Antibody Inhibitors</b>	Omalizumab	Omalizumab Medications List	Injection
<b>Anti-Interleukin-4</b>	Dupilumab	Dupilumab Medications List	Injection
<b>Anti-Interleukin-5</b>	Benralizumab	Benralizumab Medications List	Injection
<b>Anti-Interleukin-5</b>	Mepolizumab	Mepolizumab Medications List	Injection

NOTE: Table continues on next page



## (AMR) ASTHMA MEDICATION RATIO (CONTINUED)

### Asthma Controller Medications (Continued)

DESCRIPTION	PRESCRIPTIONS	MEDICATION LISTS	ROUTE
<b>Anti-Interleukin-5</b>	Reslizumab	Reslizumab Medications List	Injection
<b>Inhaled Steroid Combinations</b>	Budesonide-formoterol	Budesonide-formoterol Medications List	Inhalation
<b>Inhaled Steroid Combinations</b>	Fluticasone-salmeterol	Fluticasone-salmeterol Medications List	Inhalation
<b>Inhaled Steroid Combinations</b>	Fluticasone-vilanterol	Fluticasone-vilanterol Medications List	Inhalation
<b>Inhaled Steroid Combinations</b>	Formoterol-mometasone	Formoterol-mometasone Medications List	Inhalation
<b>Inhaled Corticosteroids</b>	Beclomethasone	Beclomethasone Medications List	Inhalation
<b>Inhaled Corticosteroids</b>	Budesonide	Budesonide Medications List	Inhalation
<b>Inhaled Corticosteroids</b>	Ciclesonide	Ciclesonide Medications List	Inhalation
<b>Inhaled Corticosteroids</b>	Flunisolide	Flunisolide Medications List	Inhalation
<b>Inhaled Corticosteroids</b>	Fluticasone	Fluticasone Medications List	Inhalation
<b>Inhaled Corticosteroids</b>	Mometasone	Mometasone Medications List	Inhalation
<b>Leukotriene Modifiers</b>	Montelukast	Montelukast Medications List	Oral
<b>Leukotriene Modifiers</b>	Zafirlukast	Zafirlukast Medications List	Oral
<b>Leukotriene Modifiers</b>	Zileuton	Zileuton Medications List	Oral
<b>Methylxanthines</b>	Theophylline	Theophylline Medications List	Oral

\*Codes subject to change

**(AMR) ASTHMA MEDICATION RATIO (CONTINUED)**

**Asthma Reliever Medications**

DESCRIPTION	PRESCRIPTIONS	MEDICATION LISTS	ROUTE
<b>Short-Acting, Inhaled Beta-2 Agonists</b>	Albuterol	Albuterol Medications List	Inhalation
<b>Short-Acting, Inhaled Beta-2 Agonists</b>	Levalbuterol	Levalbuterol Medications List	Inhalation

\*Codes subject to change



**(CWP) APPROPRIATE TESTING FOR PHARYNGITIS**

Measure demonstrates the percentage of episodes for members 3 years and older in which the member was diagnosed with pharyngitis, dispensed an antibiotic, and was given a group A streptococcus (strep) test for the episode.

CPT*
87070, 87071, 87081, 87430, 87650-87652, 87880

\*Codes subject to change



**(CWP) ANTIBIOTIC MEDICATIONS**

DESCRIPTION	PRESCRIPTIONS
<b>Aminopenicillins</b>	• Amoxicillin                      • Ampicillin
<b>Beta-lactamase inhibitors</b>	• Amoxicillin-clavulanate
<b>First generation cephalosporins</b>	• Cefadroxil                      • Cefazolin • Cephalexin
<b>Folate antagonist</b>	• Trimethoprim
<b>Lincomycin derivatives</b>	• Clindamycin



**(FUH) FOLLOW-UP AFTER HOSPITALIZATION FOR MENTAL ILLNESS**

Measure evaluates the percentage of discharges for members ages 6 and older 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. Two rates are reported:

- Discharges for which the member received **follow-up within 30 days of discharge.**
- Discharges for which the member received **follow-up within 7 days of discharge.**

**(FUH) FOLLOW-UP AFTER HOSPITALIZATION FOR MENTAL ILLNESS (CONTINUED)**

DESCRIPTION	CODES
<b>Visit Setting Unspecified Value Set with Outpatient POS with Mental Health Provider</b>	<b>CPT:</b> 90791, 90792, 90832-90834, 90836-90839, 90845-90847, 90849, 90853, 90865, 90867-90870, 90875, 90876, 90880, 90887, 99231-99233, 99238, 99239, 99251-99255, 99484, 99492, 99493 <b>POS:</b> 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 71, 72
<b>BH Outpatient Visit with Mental Health Provider</b>	<b>CPT:</b> 98960-98962, 99078, 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99510, 99483, 99492-99494, 99510 <b>HCPCS:</b> G0155, G0176, G0177, G0409, G0463, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013-H2020, T1015
<b>Visit Setting Unspecified Value Set with Partial Hospitalization POS with Mental Health Provider</b>	<b>CPT:</b> 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 <b>POS:</b> 52
<b>Partial Hospitalization/Intensive Outpatient</b>	<b>HCPCS:</b> G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485
<b>Visit Setting Unspecified Value Set with Community Mental Health Center POS</b>	<b>CPT:</b> 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 <b>POS:</b> 53
<b>Electroconvulsive Therapy with Ambulatory Surgical Center POS/ Community Mental Health Center POS/ Outpatient POS/ Partial Hospitalization POS</b>	<b>CPT:</b> 90870 <b>Ambulatory POS:</b> 24 <b>Comm. POS:</b> 53 <b>Partial Hosp. POS:</b> 52 <b>Outpatient POS:</b> 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 71, 72 <b>ICD-10:</b> GZB4ZZZ
<b>Telehealth Visit</b>	<b>CPT:</b> 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 <b>POS:</b> 02, 10
<b>Observation</b>	<b>CPT:</b> 99217-99220
<b>Transitional Care Management</b>	<b>CPT:</b> 99495, 99496
<b>Telephone Visit</b>	<b>CPT:</b> 98966-98968, 99441-99443

\*Codes subject to change



**(IET) INITIATION AND ENGAGEMENT OF SUBSTANCE USE DISORDER TREATMENT**

Measure evaluates the percentage of new substance use disorder (SUD) episodes that result in treatment initiation and engagement for patients who received the following:

- **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.
- **Engagement of SUD Treatment:** The percentage of new SUD episodes that have evidence of treatment engagement within 34 days of initiation.

DESCRIPTION	CODES
<b>Initiation and Engagement/Treatment</b>	<p><b>CPT:</b> 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99221-99223, 99231, 99233, 99238, 99239, 99241-99245, 99341-99345, 99347-99350, 99251-99255, 99381-99387, 99401-99404, 99408, 99409, 99411, 99412, 99483, 99492-99494, 99510</p> <p><b>HCPS:</b> G0155, G0176, G0177, G0396, G0397, G0409-G0411, G0443, G0463, H0001, H0002, H0004, H0005, H0007, H0015, H0016, H0022, H0031, H0034-H0037, H0039, H0040, H0047, H2000, H2001, H2010-H2020, H2035, H2036, S0201, S9480, S9484, S9485, T1006, T1012, T1015</p> <p><b>POS:</b> 02, 03, 05, 07, 09, 11-20, 22, 33, 49-50, 52-53, 57, 58, 71-72</p>
<b>Telephone Visits</b>	<b>CPT:</b> 98966-98968, 99441-99443
<b>E-visit/Virtual Check-In</b>	<p><b>CPT:</b> 98969-98972, 99421-99423, 99444, 99457</p> <p><b>HCPCS:</b> G0071 G2010, G2012, G2061-G2063</p>

\*Codes subject to change

**NOTE: For the follow-up treatments, include an ICD-10 diagnosis for SUD from the Mental, Behavioral, and Neurodevelopmental Disorder Section of ICD-10 along with a procedure code for the preventive service, evaluation, and management consultation or counseling service.**





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