

Quick Reference Guide HEDIS® MY 2022

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HEDIS® MY 2022 Quick Reference Guide

Updated to reflect NCQA HEDIS® MY 2022 Technical Specifications

MHS 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®?

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

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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, 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337, 98966-98968, 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, Z00.3, Z00.5, Z00.8, Z00.121, Z00.129, 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



(ACP) Advance Care Planning

Measure evaluates percentage of adults:

- √ 66-80 years of age with advanced illness, an indication of frailty, or who are receiving palliative care and had advance care planning;
- ✓ 81 years of age and older who had advance care planning

| Description | Codes* |
|------------------------|--|
| Advanced Care Planning | CPT: 99483, 99497 |
| | CPT-CAT-II: 1123F, 1124F, 1157F, 1158F |
| | HCPCS: S0257 |
| | ICD-10: Z66 |

^{*}Codes subject to change



(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)
- 2 Effective Continuation Phase Treatment: percentage of members who remained on an antidepressant medication for at least 180 days (6 months)

(AMM) Antidepressant Medication Management (continued)

| Antidepressant Medications | | | |
|----------------------------------|---|--|--|
| Description | Prescription | | |
| Miscellaneous antidepressants | BupropionVortioxetine | · Vilazodone | |
| Monoamine oxidase inhibitors | IsocarboxazidPhenelzine | SelegilineTranylcypromine | |
| Phenylpiperazine antidepressants | · Nefazodone | · Trazodone | |
| Psychotherapeutic combinations | Amitriptyline-cFluoxetine-olanAmitriptyline-p | zapine . | |
| SNRI antidepressants | DesvenlafaxineVenlafaxine | DuloxetineLevomilnacipran | |
| SSRI antidepressants | CitalopramFluvoxamine | EscitalopramParoxetine | FluoxetineSertraline |
| Tetracyclic antidepressants | • Maprotiline | · Mirtazapine | |
| Tricyclic antidepressants | AmitriptylineDesipramineNortriptyline | AmoxapineDoxepin (>6 mg)Protriptyline | ClomipramineImipramineTrimipramine |



(BPD) Blood Pressure Control for Patients With Diabetes

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

| Description | Codes* |
|--|--|
| Palliative Care | HCPCS: G9054, M1017 ICD-10: Z51.5 |
| Outpatient Codes (must include a diagnosis of diabetes) | CPT: 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99341-99345, 99347-99350, 99381-99987, 99391-99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, 99455, 99456, 99483 HCPCS: G0402, G0438, G0439, G0463, T1015 |
| Non-Acute Inpatient (must include a diagnosis of diabetes) | CPT: 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337 |
| Telephone Visits (must include a diagnosis of diabetes) | CPT: 98966-98968, 99441-99443 |
| E-Visits or Virtual Check-ins (must include a diagnosis of diabetes) | CPT: 98969-98972, 99421-99423, 99444, 99457 HCPCS: G0071, G2010, G2012, G2061-G2063 |
| Systolic Greater Than/ Equal to 140 | CPT-CAT-II: 3077F |
| Systolic Less Than 140 | CPT-CAT-II: 3074F, 3075F |
| Diastolic 80-89 | CPT-CAT-II: 3079F |
| Diastolic Greater Than/ Equal to 90 | CPT-CAT-II: 3080F |
| Diastolic Less Than 80 | CPT-CAT-II: 3078F |

^{*}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 (HTN) and whose BP was adequately controlled (<140/90 mm Hg).

| Description | Codes* |
|------------------------------------|--------------------------------------|
| Essential Hypertension | ICD-10: 110 |
| Systolic Greater Than/Equal to 140 | CPT-CAT-II: 3077F |
| Systolic Less Than 140 | CPT-CAT-II: 3074F, 3075F |
| Diastolic Greater Than/Equal to 90 | CPT-CAT-II: 3080F |
| Diastolic 80-89 | CPT-CAT-II: 3079F |
| Diastolic Less Than 80 | CPT-CAT-II: 3078F |
| Telephone Visits | CPT: 98966-98968, 99441-99443 |
| Palliative Care | HCPCS: G9054, M1017 |
| | ICD-10: Z51.5 |
| *Codes subject to change | |



(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* |
|--|--|
| Medication Review (would need both CPT-CAT II codes to get credit) 1159F (Medication List) & 1160F (Medication Review) | CPT: 90863, 99605, 99606, 99483, 99495, 99496 CPT-CAT-II: 1159F, 1160F |
| Functional Status Assessment | CPT: 99483 CPT-CAT-II: 1170F HCPCS: G0438, G0439 |
| Pain Assessment | CPT-CAT-II: 1125F, 1126F |

^{*}Codes subject to change

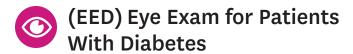


(COL) Colorectal Cancer Screening

Measure evaluates the percentage of members 45-75 years of age who has had an appropriate screening for colorectal cancer.

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

^{*}Codes subject to change



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

| Description | Codes* |
|--|---|
| Palliative Care | HCPCS: G9054, M1017 ICD-10: Z51.5 |
| Outpatient Codes (must include a diagnosis of diabetes) | CPT: 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, 99455, 99456, 99483 HCPCS: G0402, G0438, G0439, G0463, T1015 |
| Non-Acute Inpatient (must include a diagnosis of diabetes) | CPT: 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337 |
| Telephone Visits (must include a diagnosis of diabetes) | CPT: 98966-98968, 99441-99443 |
| E-Visits or Virtual Check-ins (must include a diagnosis of diabetes) | CPT: 98969-98972, 99421-99423, 99444, 99457 HCPCS: G0071, G2010, G2012, G2061-G2063 |
| Unilateral Eye Enucleation With a Bilateral Modifier | CPT: 65091, 65093, 65101, 65103, 65105, 65110,65112, 65114 CPT Modifier: 50 |
| Automated Eye Exam | CPT: 92229 |
| Diabetic Retinal Screening Negative in Prior Year | CPT-CAT-II: 3072F |
| Eye Exam With Retinopathy | CPT-CAT-II: 2022F, 2024F, 2026F |
| Eye Exam Without Retinopathy | CPT-CAT-II: 2023F, 2025F, 2033F |

^{*}Codes subject to change



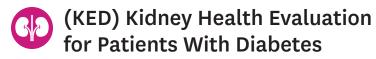
(HBD) Hemoglobin A1c Control for Patients With Diabetes

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

✓ HbA1c control (<8.0%)
✓ HbA1c Poor control (>9.0%)

| Description | Codes* |
|--|---|
| Palliative Care | HCPCS: G9054, M1017 |
| | ICD-10: Z51.5 |
| Outpatient Codes (must include a diagnosis of diabetes) | CPT: 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, 99455, 99456, 99483 HCPCS: G0402, G0438, G0439, G0463, T1015 |
| Non-Acute Inpatient (must include a diagnosis of diabetes) | CPT: 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337 |
| Telephone Visits (must include a diagnosis of diabetes) | CPT: 98966-98968, 99441-99443 |
| E-Visits or Virtual Check-ins (must include a diagnosis of diabetes) | CPT: 98969-98972, 99421-99423, 99444, 99457 HCPCS: G0071, G2010, G2012, |
| C. G.G. C. | G2061-G2063 |
| HbA1c Lab Test | CPT: 83036, 83037 |
| HbA1c Level Less than 7 Codes | CPT-CAT-II: 3044F |
| HbA1c Level Greater Than/Equal to 7 and Less than 8 | CPT-CAT-II: 3051F |
| HbA1c Level Greater Than/Equal to 8 and Less Than/Equal to 9 | CPT-CAT-II: 3052F |
| HbA1c Greater Than 9.0 | CPT-CAT-II: 3046F |

^{*}Codes subject to change



The percentage of members 18–85 years of age 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.

| Description | Codes* |
|---|--|
| Estimated Glomerular Filtration Rate (eGFR) – must be within 4 days or less of the uACR | CPT: 80047, 80048, 80050, 80053, 80069, 82565 |
| Urine Albumin-Creatinine Ratio (uACR) – must be within 4 days or less of the eGFR | CPT: 82043, 82570 |
| Palliative Care | HCPCS: G9054, M1017 ICD-10: Z51.5 |

^{*}Codes subject to change



(PBH) Persistence of Beta-Blocker Treatment After a Heart Attack

This measure demonstrates the percentage of members 18 years of age 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-Blocke | r Medication | | |
|----------------------------------|---|--|---|------------|
| Description | Prescription | | | |
| Noncardioselective beta-blockers | CarvedilolPropranolol | LabetalolTimolol | NadololSotalol | • Pindolol |
| Cardioselective beta-blockers | AcebutololAtenolol | BetaxololBisoprolol | MetoproloNebivolol | |
| Antihypertensive combinations | Atenolol-chlorthalidone Bendroflumethiazide-nadolol Bisoprolol-hydrochlorothiazide Hydrochlorothiazide-metoprolol Hydrochlorothiazide-propranolol | | | |



(PCE) Pharmacotherapy Management of COPD Exacerbation

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

Two rates are reported:

- 1 Dispensed a systemic **corticosteroid** (or there was evidence of an active prescription) **within 14 days of the event**
- 2 Dispensed a **bronchodilator** (or there was evidence of an active prescription) within **30 days of the event**

(PCE) Pharmacotherapy Management of COPD Exacerbation (continued)

| | Systemic Corticostero | id Med | ications | |
|-----------------------------|--|-------------------------------|---|---|
| Description | Prescription | | | |
| Glucocorticoids | CortisonePrednisoloneMethylprednisolone | • Dexa | ocortisone methasone nisone | |
| | Bronchodilator M | edicati | ons | |
| Description | Prescription | | | |
| Anticholinergic agents | Aclidinium-bromideIpratropium | · Ume | clidinium opium | |
| Beta 2-agonists | AlbuterolMetaproterenolIndacaterol | | buterol oterol aterol | ArformoterolSalmeterol |
| Bronchodilator combinations | Albuterol-ipratropiun Budesonide-formote Formoterol-mometas Glycopyrrolate-indac Umeclidinium-Vilante Olodaterol-tiotropiun | rol sone aterol erol | FormoteroFluticasoFluticasoFluticaso | ol-aclidinium ol-glycopyrrolate ne-salmeterol ne-vilanterol ne furoate- nium-vilarterol |



(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 | Prescription |
|-----------------|--|
| HbA1c Lab Tests | CPT: 83036, 83037 CPT-CAT-II: 3044F, 3046F, 3051F, 3052F |
| LDL-C Lab Tests | CPT: 80061, 83700, 83701, 83704, 83721 CPT-CAT-II: 3048F, 3049F, 3050F |

^{*}Codes subject to change



(SPR) Use of Spirometry Testing in the Assessment and Diagnosis of COPD

Measure evaluates the percentage of members 40 years of age 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 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.

| Description | Codes* |
|-------------------|--|
| HbA1c Lab Tests | CPT: 83036, 83037 CPT-CAT-II: 3044F, 3046F, 3051F, 3052F |
| Glucose Lab Tests | CPT: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951 |

^{*}Codes subject to change

Women's Health



(BCS) Breast Cancer Screening

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

| Description | Codes* |
|-----------------|---|
| Mammogram | CPT: 77061-77063, 77065-77067 ICD-10 (bilateral mastectomy): Z90.13 |
| Palliative Care | HCPCS: G9054, M1017 ICD-10: Z51.5 |

^{*}Codes subject to change



(CCS) Cervical Cancer Screening

This measure demonstrates the percentage of women 21-64 years of age who were screened for cervical cancer using either of the following criteria:

- ✓ Women 21-64 years of age who had cervical cytology performed within last 3 years.
- ✓ Women 30-64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last 5 years.
- ✓ Women 30-64 years of age who had cervical cytology/high risk human papillomavirus (hrHPV) co-testing within the last 5 years.

(CCS) Cervical Cancer Screening (continued)

| Description | Codes* |
|--|--|
| Cervical Cytology Lab Test (20-64) | CPT: 88141-88143, 88147, 88148, 88150, 88152-88154, 88164-88167, 88174, 88175 HCPCS: G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091 |
| HPV Tests (30-64) | CPT: 87624, 87625 HCPCS: G0476 |
| Hysterectomy with No Residual Cervix and Absence of Cervix Diagnosis | CPT: 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 ICD-10: Q51.5, Z90.710, Z90.712 |
| Palliative Care | HCPCS: G9054, M1017 ICD-10: Z51.5 |

^{*}Codes subject to change



(CHL) Chlamydia Screening in Women

Measure evaluates the percentage of women 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 Women Who Had a Fracture

Measure evaluates the percentage of women 67-85 years of age who suffered a fracture and who had either a bone mineral density (BMD) test or prescription for a drug to treat osteoporosis in the six months after the fracture.

| Description | Codes* |
|---|--|
| Palliative Care | HCPCS: G9054, M1017 ICD-10: Z51.5 |
| Bone Mineral Density Tests | CPT: 76977, 77078, 77080, 77081, 77085, 77086 |
| Osteoporosis Medications | HCPCS: J0897, J1740, J3110, J3111, J3489 |
| Long-Acting Osteoporosis Medications during Inpatient Stay | HCPCS: J0897, J1740, J3489 |

^{*}Codes subject to change

| Osteoporosis Medications | | | |
|--------------------------|--|--|-------------|
| Description | Prescription | | |
| Bisphosphonates | AlendronateIbandronate | Alendronate-chRisedronate | |
| Other agents | AbaloparatideTeriparatide | RomosozumabRaloxifene | · Denosumab |



(OSW) Osteoporosis Screening in Older Women

The percentage of women 65–75 years of age who received osteoporosis screening.

| Description | Codes* |
|------------------------------|---|
| Osteoporosis Screening Tests | CPT: 76977, 77078, 77080, 77081, 77085 |
| Palliative Care | HCPCS: G9054, M1017 ICD-10: Z51.5 |

^{*}Codes subject to change



(PPC) Prenatal and Postpartum Care

Measure evaluates 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 women, 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

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

- 1 Initiation Phase: percentage of members 6-12 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
- 2 Continuation and Maintenance (C&M) Phase: percentage of members 6-12 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 (9 months) after the Initiation Phase ended

| Description | Codes* |
|---------------|---|
| An Outpatient | CPT: 90791, 90792, 90832-90834, 90836-90840, |
| Visit | 90845, 90847, 90849, 90853, 90875, 90876, |
| | 99221-99223, 99231-99233, 99238, 99239, 99251-99255 |
| | POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, |
| | 22, 33, 49, 50, 71, 72 |



(ADD) Follow-up Care for Children Prescribed ADHD Medication (continued)

| Description | Codes* |
|---|--|
| BH Outpatient Visit | CPT: 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 HCPCS: G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, T1015 |
| Observation Visit | CPT: 99217-99220 |
| Health and Behavior Assessment/ Intervention | CPT: 96150-96154, 96156, 96158, 96159, 96164, 96165, 96167, 96168, 96170, 96171 |
| Visit Setting Unspecified Value Set with Partial Hospitalization POS | CPT: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 POS: 52 |
| Partial Hospitalization/ Intensive Outpatient | HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485 |
| Telehealth Visit | CPT: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 POS: 02, 10 |
| Telephone Visits | CPT: 98966-98968, 99441-99443 |
| E-visit/Virtual Check-In | CPT: 98969-98972, 99421-99423, 99444, 99457 HCPCS: G0071, G2010, G2012, G2061, G2062, G2063 |
| Visit Setting Unspecified Value Set with Community Mental Health Center POS | CPT: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 POS: 53 |
| Narcolepsy | ICD-10: G47.411, G47.419, G47.421, G47.429 |
| | |

^{*}Codes subject to change



(APM) Metabolic Monitoring for Children and Adolescents on Antipsychotics

This measure demonstrates the percentage of children and adolescents 1-17 years of age 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
- 2 Percentage of children and adolescents on antipsychotics who received cholesterol testing
- 3 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* |
|---|--|
| HbA1c Lab Tests | CPT: 83036, 83037 CPT-CAT-II: 3044F, 3046F, 3051F, 3052F |
| Glucose Lab Tests | CPT: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951 |
| LDL-C Lab Tests | CPT: 80061, 83700, 83701, 83704, 83721 CPT-CAT-II: 3048F, 3049F, 3050F |
| Cholesterol Lab Tests | CPT: 82465, 83718, 83722, 84478 |

^{*}Codes subject to change



(CIS) Childhood Immunization Status

This measure demonstrates the percentage of children 2 years of age who completed immunizations on or before child's second birthday.

| Description | Codes* |
|--|---|
| DTaP (4 dose) | CPT: 90697, 90698, 90700, 90723 CVX: 20, 50, 106, 107, 110, 120, 146 |
| HIB (3 dose) | CPT: 90644, 90647, 90648, 90697, 90698, 90748 CVX: 17, 46, 47, 48, 49, 50, 51, 120, 146, 148 |
| Newborn Hep B (3 dose) | CPT: 90697, 90723, 90740, 90744, 90747, 90748 CVX: 08, 44, 45, 51, 110, 146 HCPCS: G0010 ICD-10: B16.0, B16.1, B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11 |
| IPV (3 dose) | CPT: 90697, 90698, 90713, 90723 CVX: 10, 89, 110, 120, 146 |
| MMR (1 dose) | CPT: 90707, 90710 CVX: 03, 94 ICD-10: B05.0, B05.1, B05.2, B05.3, B05.4, B05.81, B05.89, B05.9, B26.0, B26.1, B26.2, B26.3, B26.81, B26.82. B26.83, B26.84, B26.85, B26.89, B26.9, B06.00, B06.01, B06.02, B06.09, B06.81, B06.82, B06.89, B06.9 |
| Pneumococcal Conjugate PCV (4 dose) | CPT: 90670 CVX: 109, 133, 152 HCPCS: G0009 |
| Varicella VZV (1 dose) | CPT: 90710, 90716 CVX: 21, 94 ICD-10: B01.0, B01.11, B01.12, B01.2, B01.81, B01.89, B01.9, B02.0, B02.1, B02.21, B02.22, B02.23, B02.24, B02.29, B02.30, B02.31, B02.32, B02.33, B02.34, B02.39, B02.7, B02.8, B02.9 |

(CIS) Childhood Immunization Status (continued)

| Description | Codes* |
|--|---|
| Hep A (1 dose) | CPT: 90633 CVX: 31, 83, 85 ICD-10: B15.0, B15.9 |
| Influenza Flu (2 dose) LAIV vaccination must be administered on the child's 2nd birthday | CPT: 90655, 90657, 90660, 90661, 90672, 90673, 90685-90689 CVX: 88, 140, 141, 150, 153, 155, 158, 161, 111, 149 HCPCS: G0008 |
| Rotavirus (2 Dose) | CPT: 90681 CVX: 119 |
| Rotavirus (3 Dose) | CPT: 90680 CVX: 116, 122 |
| Anaphylaxis | Use applicable SNOMED as indicated per vaccine |

^{*}Codes subject to change

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



(IMA) Immunizations for Adolescents

Measure evaluates percentage of adolescents 13 years of age who completed immunizations on or before member's 13th birthday

| Description | Codes* |
|---|--|
| Meningococcal – serogroup A,C,W, and Y: (1 dose) | CPT: 90619, 90733, 90734 CVX: 32, 108, 114, 136, 147, 167, 203 |
| Tdap (1 dose) | CPT: 90715 CVX: 115 |
| HPV (2 or 3 dose series) | CPT: 90649-90651 CVX: 62, 118, 137, 165 |
| Anaphylaxis | Use applicable SNOMED as indicated per vaccine |
| *Codes subject to change | |



(LSC) Lead Screening in Children

Measure evaluates 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

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 practitioner during the measurement year.

(W30) Well-Child Vists in the First 30 Months of Life: Children who had the following number of well-child visits with 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 Age 15 Months-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, | G0438, G0439, | Z00.110, Z00.111, Z00.121, |
| 99392, 99461 | S0302 | 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 of age 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, S0610, S0612, S0613 | Z00.00, Z00.01, Z00.121, Z00.129, Z00.2, Z00.3, Z01.411, Z01.419, Z02.5, Z76.2 |

^{*}Codes subject to change



(WCC) Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

This measure demonstrates the percentage of members 3-17 years of age 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* |
|----------------------|---|
| BMI Percentile | ICD-10: Z68.51, Z68.52, Z68.53, Z68.54 |
| Nutrition Counseling | CPT: 97802-97804 HCPCS: G0270, G0271, G0447, S9449, S9452, S9470 ICD-10: Z71.3 |
| Physical Activity | HCPCS: G0447, S9451 ICD-10: Z02.5, Z71.82 |

^{*}Codes subject to change

General Health



(AMR) Asthma Medication Ratio

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

| Asthma Controller Medications | | | |
|-------------------------------|------------------------------|---|-----------|
| Description | Prescriptions | Medication Lists | Route |
| Antiasthmatic combinations | • Dyphylline- guaifenesin | Dyphylline Guaifenesin Medications List | Oral |
| Antibody inhibitors | · Omalizumab | Omalizumab Medications List | Injection |

(AMR) Asthma Medication Ratio (continued)

| | Asthma Controller | Medications | |
|------------------------------|--|---|------------|
| Description | Prescriptions | Medication Lists | Route |
| Anti-interleukin-4 | • Dupilumab | Dupilumab Medications List | Injection |
| Anti-interleukin-5 | · Benralizumab | Benralizumab Medications List | Injection |
| Anti-interleukin-5 | • Mepolizumab | Mepolizumab Medications List | Injection |
| Anti-interleukin-5 | · Reslizumab | Reslizumab Medications List | Injection |
| Inhaled steroid combinations | Budesonide- formoterol | Budesonide Formoterol Medications List | Inhalation |
| Inhaled steroid combinations | · Fluticasone- salmeterol | Fluticasone Salmeterol Medications List | Inhalation |
| Inhaled steroid combinations | · Fluticasone- vilanterol | Fluticasone Vilanterol Medications List | Inhalation |
| Inhaled steroid combinations | · Formoterol- mometasone | Formoterol Mometasone Medications List | Inhalation |
| Inhaled corticosteroids | Beclomethasone | Beclomethasone Medications List | Inhalation |
| Inhaled corticosteroids | · Budesonide | Budesonide Medications List | Inhalation |
| Inhaled corticosteroids | · Ciclesonide | Ciclesonide Medications List | Inhalation |
| Inhaled corticosteroids | Flunisolide | Flunisolide Medications List | Inhalation |
| Inhaled corticosteroids | · Fluticasone | Fluticasone Medications List | Inhalation |

(AMR) Asthma Medication Ratio (continued)

| | Asthma Controlle | er Medications | |
|---|-----------------------------|----------------------------------|------------|
| Description | Prescriptions | Medication Lists | Route |
| Inhaled corticosteroids | Mometasone | Mometasone Medications List | Inhalation |
| Leukotriene modifiers | • Montelukast | Montelukast Medications List | Oral |
| Leukotriene modifiers | · Zafirlukast | Zafirlukast Medications List | Oral |
| Leukotriene modifiers | · Zileuton | Zileuton Medications List | Oral |
| Methylxanthines | · Theophylline | Theophylline Medications List | Oral |
| | Asthma Reliever Medications | | |
| Description | Prescriptions | Medication Lists | Route |
| Short-acting, inhaled beta-2 agonists | Albuterol | Albuterol Medications List | Inhalation |
| Short-acting, inhaled beta-2 agonists | Levalbuterol | Levalbuterol Medications List | Inhalation |



(CWP) Appropriate Testing for Pharyngitis

This measure demonstrates the percentage of episodes for members 3 years and older where the member was diagnosed with pharyngitis, dispensed an antibiotic, and received a group A streptococcus (strep) test for the episode.

CPT*

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

^{*}Codes subject to change



(FUH) Follow-Up After Hospitalization for Mental Illness

Measure evaluates percentage of discharges for members 6 years of age 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:

- 1 Discharges for which the member received follow-up within 30 days after discharge
- Discharges for which the member received follow-up within7 days after discharge

| Description | Codes* |
|---|---|
| Visit Setting Unspecified Value Set with Outpatient POS with Mental Health Provider | CPT: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 71, 72 |
| BH Outpatient Visit with Mental Health Provider | CPT: 98960-98962, 99078, 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99492-99494, 99510, 99483 HCPCS: G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013-H2020, T1015 |

(FUH) Follow-Up After Hospitalization for Mental Illness (continued)

| Description | Codes* |
|---|--|
| Visit Setting Unspecified Value Set with Partial Hospitalization POS with Mental Health Provider | CPT: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 POS: 52 |
| Partial Hospitalization/Intensive Outpatient | HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485 |
| Visit Setting Unspecified Value Set with Community Mental Health Center POS | CPT: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 POS: 53 |
| Electroconvulsive Therapy with Ambulatory Surgical Center POS/ Community Mental Health Center POS/ Outpatient POS/Partial Hospitalization POS | CPT: 90870 Ambulatory POS: 24 Comm. POS: 53 Partial Hosp. POS: 52 Outpatient POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 71, 72 |
| Telehealth Visit | CPT: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 POS: 02, 10 |
| Observation | CPT: 99217-99220 |
| Transitional Care Management | CPT: 99495, 99496 |
| Telephone Visit | CPT: 98966-98968, 99441-99443 |
| Psychiatric Collaborative Care Management | CPT: 99492-99494 HCPCS: G0512 |

^{*}Codes subject to change



(IET) Initiation and Engagement of Substance Use Disorder Treatment

Measure evaluates percentage of adolescent and adult members with a new episode of substance use disorder (SUD) episodes that result in treatment initiation and engagement:

- ✓ **Initiation of SUD Treatment:** percentage of new SUD episodes that result in treatment initiation through an inpatient SUD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days
- ✓ Engagement of SUD Treatment: percentage of new SUD episodes that have evidence of treatment engagement within 34 days of initiation

| Alcohol Use Disorder Treatment Medications | | |
|--|--|--|
| Description | Prescription | |
| Aldehyde dehydrogenase inhibitor | Disulfiram (oral) | |
| Antagonist | Naltrexone (oral and injectable) | |
| Other | Acamprosafe (oral; delayed-release tablet) | |

| Opioid Use Disorder Treatment Medications | | | |
|---|-----------------------------------|--|--|
| Description | Prescription | Medication Lists | |
| Antagonist | Naltrexone (oral) | Naltrexone Oral Medication List | |
| Antagonist | Naltrexone (injectable) | Naltrexone Injection Medication List | |
| Partial agonist | Buprenorphine (sublingual tablet) | Buprenorphine Oral Medication List | |
| Partial agonist | Buprenorphine (injection) | Buprenorphine Injection Medication List | |

(IET) Initiation and Engagement of Substance Use Disorder Treatments (continued)

| Partial agonist | Buprenorphine (implant) | Buprenorphine Implant Medication List |
|--------------------------------------|---|---|
| Partial agonist | Buprenorphine/naloxone (sublingual tablet, buccal film, sublingual film) | Buprenorphine Naloxone Medication List |
| Description | Codes* | |
| Initiation and Engagement/ Treatment | CPT: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99221-99223, 99231, 99232, 99233, 99238, 99239, 99241-99245, 99341-99345, 99347-99350, 99251-99255, 99381-99387, 99391-99397, 99401-99404, 99408, 99409, 99411, 99412, 99483, 99492-99494, 99510 HCPCS: G0155, G0176, G0177, G0396, G0397, G0409, G0443, G0463, G2086, G2087, G0512, G2067-G2078, G2080, H0001, H0002, H0004, H0005, H0007, H0015, H0016, H0022, H0031, H0034-H0037, H0039, H0040, H0047, H0050, H2000, H2010, H2011, H2013-H2020, H2035, H2036, S0201, S9480, S9484, S9485, T1006, T1012, T1015 POS: 02, 03, 05, 07, 09, 11-20, 22, 33, 49-50, 52-53, 57, 58, 71-72 | |
| Telephone Visits | CPT: 98966-98968, 99441- | 99443 |
| E-visit/Virtual Check-In | CPT: 98969-98972, 99421-9 HCPCS: G0071, G2010, G20 | |

^{*}Codes subject to change

*For the follow-up treatments, include an ICD-10 diagnosis for Alcohol or Other Drug Dependence 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.

