

## Tips for Optimizing HEDIS® Results

### PREVENTION AND SCREENING

HEDIS Measure	Required Documentation	CPT, HCPCS, LOINC and CPT II Performance Codes	Diagnosis/Procedure Codes, ICD-10 CM and SNOMED CT US Edition	Provider Specialty
<b>Adult BMI Assessment – 18 years of age and older</b>	<p>BMI assessed and documented during an office visit in <b>2019 or 2018</b>. Documentation must include a weight from that visit.</p> <p>For members <b>younger than 20 years</b> on the date of service, documentation in the medical record must indicate the height, weight and <b>BMI percentile</b>, dated during the measurement year (MY) or prior year (PY). The height, weight and BMI percentile must be from the same data source.</p> <p><a href="#">Refer to the Provider Resource Center: Preventive Health Guidelines, Adult Guidelines</a></p>	<p>LOINC - 39156-5, 89270-3 (BMI Ratio) 59574-4, 59575-1, 59576-9 (BMI Percentile)</p>	<p><b>Select the appropriate code:</b>  Z68.1 BMI 19 or less, adult  Z68.20 BMI 20.0-20.9, adult  Z68.21 BMI 21.0-21.9, adult  Z68.22 BMI 22.0-22.9, adult  Z68.23 BMI 23.0-23.9, adult  Z68.24 BMI 24.0-24.9, adult  Z68.25 BMI 25.0-25.9, adult  Z68.26 BMI 26.0-26.9, adult  Z68.27 BMI 27.0-27.9, adult  Z68.28 BMI 28.0-28.9, adult  Z68.29 BMI 29.0-29.9, adult  Z68.30 BMI 30.0-30.9, adult  Z68.31 BMI 31.0-31.9, adult  Z68.32 BMI 32.0-32.9, adult  Z68.33 BMI 33.0-33.9, adult  Z68.34 BMI 34.0-34.9, adult  Z68.35 BMI 35.0-35.9, adult  Z68.36 BMI 36.0-36.9, adult  Z68.37 BMI 37.0-37.9, adult  Z68.38 BMI 38.0-38.9, adult  Z68.39 BMI 39.0-39.9, adult  Z68.41 BMI 40.0-44.9, adult  Z68.42 BMI 45.0-49.9, adult  Z68.43 BMI 50-59.9, adult  Z68.44 BMI 60.0-69.9, adult  Z68.45 BMI 70 or greater, adult  <b>Younger than 20 years of age</b>  Z68.51 BMI pediatric, less than 5th %  Z68.52 BMI pediatric, 5th-&lt;85th%  Z68.53 BMI, pediatric, 85th-&lt;95th%  Z68.54 BMI, pediatric, &gt; or = to 95th%</p>	<p>Applicable to all provider types</p>
<b>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents – 3 to 17 years of age</b>	<p>Documentation must include the following:</p> <ul style="list-style-type: none"> <li>• <b>BMI percentile</b> and weight and height from the same visit (can be plotted on age-growth chart)</li> <li>• Counseling for Nutrition/Diet (i.e., current nutrition/diet behaviors, educational materials, anticipatory guidance for nutrition, weight or obesity counseling)</li> <li>• Counseling for physical activity (i.e., current physical activity, exercise routine, educational materials, anticipatory guidance for physical activity, weight or obesity counseling)</li> </ul> <p><a href="#">Refer to the Provider Resource Center: Preventive Health Guidelines, Children ages 0-6, 7-18 Guidelines</a></p>	<p>LOINC - 59574-4, 59575-1, 59576-9 (BMI Percentile)</p> <p>Counseling for nutrition: CPT - 97802-97804 HCPCS - G0270, G0271, G0447, S9449, S9452, S9470</p> <p>Counseling for physical activity: HCPCS - G0447, S9451</p>	<p>Z68.51 BMI pediatric, less than 5th %  Z68.52 BMI pediatric, 5th-&lt;85th%  Z68.53 BMI, pediatric, 85th-&lt;95th%  Z68.54 BMI, pediatric, &gt; or = to 95th%</p> <p>Counseling for nutrition: Z71.3 Dietary counseling and surveillance</p> <p>Counseling for physical activity: Z02.5 Encounter for examination for participation in sport Z71.82 Exercise counseling</p>	<p>Primary Care Physician (PCP): A physician or non-physician provider (i.e., Nurse Practitioner, Physician Assistant) who offers primary care services.</p> <ul style="list-style-type: none"> <li>• General or family practice physician</li> <li>• Internal medicine physician</li> <li>• Pediatrician</li> <li>• Nurse Practitioner, Physician Assistant</li> <li>• OB/GYN for female adolescents</li> </ul>

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<b>Childhood Immunization Status</b>	<p>Complete immunizations on or before the child's 2nd birthday.</p> <ul style="list-style-type: none"> <li>• 4 doses - DTaP/DT</li> <li>• 3 doses - IPV</li> <li>• 1 dose MMR</li> <li>• 3 doses Hib</li> <li>• 3 doses Hep B</li> <li>• 1 dose VZV</li> <li>• 4 doses PCV</li> <li>• 1 dose Hep A</li> <li>• 2 or 3 doses Rotavirus</li> <li>• 2 doses Influenza</li> </ul> <p>Document the first Hep B given at birth,/at the hospital when applicable</p> <p>Document all seropositive and illness history of chicken pox, measles, mumps or rubella.</p> <p><b>PLEASE DOCUMENT PARENT REFUSAL FOR ANY IMMUNIZATIONS, AS WELL AS ANY ANAPHYLATIC REACTIONS IF APPLICABLE</b></p> <p><a href="#">Refer to the Provider Resource Center: Immunization Schedules and</a>  <a href="https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html">Refer to the CDC: Immunization Schedules</a>  <a href="https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html">https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html</a></p>	<p>Complete Immunization record with dates of service (refer to CDC Recommended Immunization schedule:<a href="http://www.cdc.gov/vaccines/pubs/acip-list.htm">http://www.cdc.gov/vaccines/pubs/acip-list.htm</a>)</p> <p><i>Please submit appropriate Combo vaccines to capture all recommended childhood vaccinations .</i></p>	<p>ICD-10-CM T80.52XA, T80.52XD, T80.52XS = anaphylactic reaction to the vaccine or its components</p>	No provider type restrictions
<b>Immunizations for Adolescents</b>	<p>Complete immunizations on or before the 13th birthday.</p> <ul style="list-style-type: none"> <li>• 1 dose Meningococcal vaccine</li> <li>• 1 dose Tdap/Td vaccine</li> <li>• 2 or 3 doses HPV vaccine</li> </ul> <p><b>PLEASE DOCUMENT PARENT REFUSAL FOR ANY IMMUNIZATIONS, AS WELL AS ANY ANAPHYLATIC REACTIONS IF APPLICABLE</b></p> <p><a href="#">Refer to the Provider Resource Center: Immunization Schedules and</a>  <a href="https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html">Refer to the CDC: Immunization Schedules</a>  <a href="https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html">https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html</a></p>	<p>Meningococcal  CPT - 90734  CVX - 136, 147, 108, 114, 167</p> <p>Tdap  CPT - 90715  CVX - 115</p> <p>HPV  CPT - 90649, 90650, 90651  CVX - 62, 118, 137, 165</p>	<p>ICD-10-CM T80.52XA, T80.52XD, T80.52XS = anaphylactic reaction to the vaccine or its components</p> <p>G04.32=postimmunization acute necrotizing hemorrhagic encephalopathy</p> <p>SNOMED CT US Edition 213320003-Anaphylactic shock caused by serum  192704009-Post-immunization encephalitis  192724008-Post mixed vaccination encephalitis</p>	No provider type restrictions
<b>Lead Screening in Children</b>	<p>At least one capillary or venous blood test prior to the child's 2nd birthday.</p> <p>This is a state requirement for all children in CHIP (Children's Health Insurance Program) regardless of a negative high risk screening questionnaire.</p> <p><a href="#">Refer to the Provider Resource Center: Children Ages 0-6 Guidelines</a></p>	<p>CPT - 83655</p> <p>LOINC - 10368-9, 10912-4, 14807-2, 17052-2, 25459-9, 27129-6, 32325-3, 5671-3, 5674-7, 77307-7</p>		No provider type restrictions
<b>Breast Cancer Screening*</b>	<p>This measure assesses the use of imaging to detect early breast cancer screening for women 50-74 years of age. All types and methods of mammograms (screening, diagnostic, film, digital breast tomosynthesis) qualify.</p> <p><u>Does not count</u> biopsies, breast ultrasounds, breast MRIs or thermal imaging alone because they are not appropriate methods for primary breast cancer screening.</p> <p>Exclusions: Bilateral Mastectomy</p> <p><a href="#">Refer to the Provider Resource Center: Women's Preventive Health Guidelines</a></p>		<p>Z90.13 Acquired absence of bilateral breasts and nipples</p> <p>SNOMED CT US Edition  428529004-History of bilateral mastectomy  136071000119101-History of bilateral prophylactic mastectomy</p>	No provider type restrictions

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<b>Cervical Cancer Screening - Women 21-64 years of age</b>	<p>This measure evaluates cervical cancer screening for women using the following criteria:</p> <ul style="list-style-type: none"> <li>• age 21-64 who had cervical cytology performed within the last 3 years</li> <li>• age 30-64 who had cervical cytology/ high risk HPV testing performed within the last 5 years</li> <li>• age 30-64 who had high risk HPV testing performed every 5 years</li> </ul> <p>Exclusions: Total, complete or radical hysterectomy.</p> <p><a href="#">Refer to the Provider Resource Center: Women's Preventive Health Guidelines</a></p>		<p>Q51.5-Agenesis and aplasia of cervix Z90.710-Acquired absence of both cervix and uterus Z90.712-Acquired absence of cervix with remaining uterus</p> <p>SNOMED CT US Edition 116140006-Total hysterectomy</p>	No provider type restrictions
<b>Colorectal Cancer Screening</b>	<p>This measure evaluates adults age 50-75 years of age using the following criteria:</p> <ul style="list-style-type: none"> <li>• FOBT during the measurement year</li> <li>• Flexible Sigmoidoscopy during the measurement year or 4 years prior</li> <li>• Colonoscopy during the measurement year or 9 years prior</li> <li>• CT colonography during the measurement year or 4 years prior</li> <li>• FIT-DNA during the measurement year or 2 years prior</li> </ul> <p>Exclusions: Diagnosis of colorectal cancer or total colectomy. Please document the date the procedure was performed in the medical and/or surgical history with the result or finding.</p> <p><a href="#">Refer to the Provider Resource Center: Adults 19 to 64 and 65 and Older</a></p>	<p>gFOBT - 82270 (3 cards) iFOBT - 82274, G0328</p> <p>CT colonography - 74261, 74262, 74263</p> <p>FIT-DNA - 81528, G0464</p>	<p>SNOMED CT US Edition History of Flexible Sigmoidoscopy - 841000119107</p> <p>History of Colonoscopy - 851000119109</p> <p>History of positive FIT DNA Test Result or Finding - 708699002</p>	No provider type restrictions
<b>Chlamydia Screening in Women*</b>	<p>This measure evaluates sexually active females age 16-24 years of age using the following criteria:</p> <ul style="list-style-type: none"> <li>• At least one chlamydia test during the measurement year</li> </ul> <p>Exclusions: Pregnancy test during the measurement year followed within seven days (inclusive) by either a prescription for isotretinoin (Accutane) or x-ray. Pregnancy test alone does not apply.</p> <p><a href="#">Refer to the Provider Resource Center: Women's Preventive Health Guidelines</a></p>	CPT - 87110, 87270, 87320, 87490-87492, 87810,	<p>SNOMED CT US Edition 707982002 - Taking throat swab for chlamydia 285586000 - Chlamydia swab</p>	No provider type restrictions

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<b>RESPIRATORY CONDITIONS</b>				
<b>Appropriate Testing for Pharyngitis*</b>	This measure evaluates children 3 years of age and older diagnosed with Pharyngitis; dispensed an antibiotic and received a Group A Strep test for the episode	Group A Strep CPT - 87070, 87071, 87081, 87430, 87650 - 87652, 87880	Pharyngitis ICD10CM - J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91  SNOMED CT US Edition - 122205003 Strep culture	No provider type restrictions
<b>Use of Spirometry Testing in the Assessment and Diagnosis of COPD*</b>	This measure evaluates adults 40 years and older with a new diagnosis of COPD or newly active COPD and received appropriate spirometry testing to confirm the diagnosis (within 6 months)	Spirometry CPT - 94010, 94014 - 94016, 94060, 94070, 94375, 94620	SNOMED CT US Edition - 171255006 Spirometry screening	No provider type restrictions
<b>Pharmacotherapy Management of COPD Exacerbation*</b>	This measure evaluates adults 40 years and older who had an acute inpatient discharge or ED encounter in the measurement year and who were prescribed appropriate medications: 1. Systemic corticosteroid within 14 days of the event 2. Bronchodilator within 30 days of the event			No provider type restrictions
<b>Medication Management for People With Asthma*</b>	This measure evaluates persistent asthma patients ages 5- 64 years who were dispensed appropriate medications and remained on them for the treatment period (through last day of measurement year)			No provider type restrictions

## CARDIOVASCULAR CONDITIONS

<b>Controlling High Blood Pressure</b>	This measure evaluates adults 18-85 years of age with a diagnosis of hypertension (HTN) and had their blood pressure (BP) controlled <140/90  The intent of the measure is to ensure that the patient has their BP monitored after six months of the initial diagnosis and at least annually thereafter. The last BP reading in the measurement year is used in reporting.  Exclusions: End-Stage Renal Disease, Kidney Transplant, or Dialysis	Blood Pressure CPT II Systolic greater $\geq$ 140 = 3077F Systolic less than 130 = 3074F Systolic 130-139 = 3075F Diastolic 80-89 = 3079F Diastolic <80 = 3078F Diastolic $\geq$ 90 = 3080F		No provider type restrictions
<b>Persistence of Beta-Blocker Treatment After a Heart Attack*</b>	This measure evaluates adults 18 years and older post-acute myocardial infarction (AMI) and received persistent beta-blocker treatment for six months after discharge  Exclusions: Intolerance or allergy to beta-blocker therapy		Exclusions: T44.7X5A, T44.7X5D, T447X5S	No provider type restrictions
<b>Statin Therapy for Patients With Cardiovascular Disease*</b>	This measure evaluates males 21-75 years of age and females 40-75 years of age who have clinical atherosclerotic cardiovascular disease (ASCVD) and met the following: 1. Received Statin Therapy (dispensed at least one high or moderate-intensity statin medication) in measurement year 2. Statin Adherence - remained on the medication for at least 80% of the treatment period  Exclusions: ESRD, Cirrhosis, Myalgia, Myositis, Rhabdomyolysis		Exclusions: Muscular Pain and Disease during the measurement year G72.0, G72.2, G72.9, M62.82, M79.1 (subset of the total list available)	No provider type restrictions

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## DIABETES

<b>Comprehensive Diabetes Care</b>	<p>At a minimum, documentation in the measurement year must include the following:</p> <ul style="list-style-type: none"> <li>HbA1c test and result (most recent in measurement year)</li> <li>Nephropathy monitoring</li> <li>Blood Pressure control (measured by last BP reading of the measurement year)</li> <li>Retinal Eye Exam</li> </ul> <p>Exclusions: Gestational diabetes, Steroid Induced diabetes in measurement year or year prior</p> <p>Remember to refer diabetic patients for an eye exam <u>every year</u> and ask for the eye exam report from the optometrist or ophthalmologist</p>	<p>CPTII - HbA1c Level</p> <ul style="list-style-type: none"> <li>&lt;7.0% = 3044F</li> <li>&gt; or = 7.0% and &lt; 8% = 3051F</li> <li>&gt; or = 8.0% and &lt; or equal to 9.0% = 3052F</li> <li>&gt;9.0% = 3046F</li> </ul> <p>Nephropathy</p> <ul style="list-style-type: none"> <li>Urine dipstick 81000-81003,82044</li> <li>Urinalysis 81005</li> <li>Urine albumin 82042-82043 Urine total protein 84156</li> <li>Positive Micro or Macroalbuminuria documented and reviewed = 3060F, 3062F</li> <li>Negative Microalbuminuria = 3061F</li> <li>Dialysis, Tx for ESRD, CRF, ARF, or renal insufficiency, and any visit to a nephrologist = 3066F</li> <li>Ace inhibitor/ARB tx = 4010F</li> </ul> <p>Eye Exams</p> <ul style="list-style-type: none"> <li>Retinal exam in the MY by an eye care professional with evidence of retinopathy = 2022F</li> <li>Dilated retinal exam without evidence of retinopathy = 2023F</li> <li>7 Standard field stereoscopic photos w/interpretation by an eye care professional in the MY with evidence of retinopathy = 2024F, 2026F</li> <li>7 Standard field stereoscopic photos w/interpretation by an eye care professional without evidence of retinopathy = 2025F</li> <li>Negative retinal or dilated eye exam in prior year 3072F</li> </ul> <p>Blood Pressure</p> <ul style="list-style-type: none"> <li>Systolic greater &gt;=140 = 3077F</li> <li>Systolic less than 130 = 3074F</li> <li>Systolic 130-139 = 3075F</li> <li>Diastolic 80-89 = 3079F</li> <li>Diastolic &lt;80 = 3078F</li> <li>Diastolic &gt;= 90 = 3080F</li> </ul>	<p>SNOMED CT US Edition-</p> <ul style="list-style-type: none"> <li>721103006 - diabetic retinopathy of eye not detected</li> <li>390853099 - diabetic maculopathy absent both eyes</li> </ul>	<p>No provider type restrictions for A1c, Nephropathy or BP indicators</p> <p>Visit with Nephrologist in measurement year counts for nephropathy monitoring</p> <p>Ophthalmologist or Optometrist for eye exam service</p>
<b>Statin Therapy for Patients With Diabetes*</b>	<p>This measure evaluates patients 40-75 years of age with diabetes who do not have atherosclerotic cardiovascular disease and met the following:</p> <ol style="list-style-type: none"> <li>Received Statin Therapy (dispensed at least one statin medication of any intensity during the measurement year)</li> <li>Statin Adherence - remained on the medication for at least 80% of the treatment period</li> </ol> <p><a href="#">Refer to Provider Resource Center: Adult Preventive Health Guidelines; Statin Use</a></p>		<p>Exclusions: Muscular Pain and Disease during the measurement year</p> <p>G72.0, G72.2, G72.9, M62.82, M79.1</p>	<p>No provider type restrictions</p>

## MUSCULOSKELETAL CONDITIONS

<b>Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis*</b>	<p>This measure evaluates adults 18 years and older that were diagnosed with rheumatoid arthritis and were dispensed at least one prescription for a disease-modifying anti-rheumatic drug (DMARD) in the measurement year</p> <p>Exclusions: History of HIV, Pregnancy</p>	<p>Includes:</p> <ul style="list-style-type: none"> <li>5-Aminosalicylates</li> <li>Alkylating agents</li> <li>Aminoquinolines</li> <li>Anti-rheumatics</li> <li>Immunomodulators</li> <li>Immunosuppressive agents</li> <li>Janus kinase inhibitor (JAK)</li> <li>Tetracyclines</li> </ul>		<p>No provider type restrictions</p>
<b>Osteoporosis Management in Women Who Had a Fracture*</b>	<p>This measure evaluates women 67-85 years who suffered a NEW fracture and who had either a bone mineral density (BMD) test or a prescription for a drug to treat or prevent osteoporosis in the six months after the fracture</p> <p>Fractures of finger, toe, face and skull are not included</p>	<p>Includes:</p> <ul style="list-style-type: none"> <li>Biphosphonates</li> <li>Other agents (i.e., Abaloparatide, Denosumab, Raloxifene, and Teriparatide)</li> </ul>		<p>No provider type restrictions</p>

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## BEHAVIORAL HEALTH

<b>Antidepressant Medication Management*</b>	This measure evaluates adults 18 years and older who were treated with antidepressant medication, had a diagnosis of major depression and remained on an antidepressant medication treatment: 1. Acute Phase (12 weeks) 2. Continuation Phase (6 months)	Includes: • Monoamine oxidase inhibitors • Phenylpiperazine antidepressants • Psychotherapeutic combinations • SNRI antidepressants • SSRI antidepressants • Tetracyclic antidepressants • Tricyclic antidepressants • Miscellaneous antidepressants (i.e., Bupropion, Vilazodone, and Vortioxetine)		No provider type restrictions
<b>Follow-Up Care for Children Prescribed ADHD*</b>	This measure evaluates children 6-12 years of age newly prescribed attention-deficit/hyperactivity (ADHD) medication who had at least three follow-up care visits within a 10 month period, one of which was within 30 days from when the medication was dispensed 1. Initiation Phase - visit within 30 days 2. Continuation and Maintenance Phase - remained on the medication for at least 210 days and had at least 2 additional follow-up visits within 9 months after the initiation Phase ended  Follow-up visits must be with a Practitioner with prescribing authority Telehealth is eligible for one visit in the C&M phase  Exclusion - children with a diagnosis of narcolepsy anytime in history through the measure year	Includes: • CNS stimulants • Alpha-2 receptor agonists • Miscellaneous ADHD medications (i.e., Atomoxetine)		Practitioner with prescribing authority
<b>Follow-Up After Hospitalization for Mental Illness*</b>	This measure evaluates patients 6 years of age and older who were hospitalized for treatment of a selected mental illness diagnosis and who had an outpatient visit, an intensive outpatient encounter or partial hospitalization with a mental health practitioner. 1. Received a follow-up visit within 30 days of discharge 2. Received a follow-up visit within 7 days of discharge			Mental Health practitioner
<b>Metabolic Monitoring for Children and Adolescents on Antipsychotics*</b>	This measure evaluates children and adolescents 1-17 years of age who had two or more antipsychotic prescriptions (the same or different medications, on different dates during the measurement year) and had metabolic testing • at least one blood glucose or HbA1c • at least one LDL-C or cholesterol	Includes: • Phenothiazine antipsychotics • Thioxanthenes • Long-acting injections • Miscellaneous antipsychotic agents • Psychotherapeutic combinations (i.e., Fluoxetine-olanzapine, Perphenazine-amitriptyline) • Prochlorperazine Medications		No provider type restrictions
<b>Follow-Up After Emergency Department Visit for Mental Illness*</b>	This measure evaluates patients 6 years of age and older who were treated in the Emergency Department (ED) with a principal mental illness diagnosis and who had an outpatient follow-up visit with any practitioner with a principal mental illness diagnosis 1. Received a follow-up visit within 30 days after the ED visit 2. Received a follow-up visit within 7 days after the ED visit			No provider type restrictions - must have a principal mental illness diagnosis

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<b>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence*</b>	This measure evaluates patients 13 years of age and older who were treated in the Emergency Department (ED) with a principal alcohol or other drug abuse or dependence (AOD) diagnosis and who had an outpatient follow-up visit with any practitioner with a principal AOD diagnosis 1. Received a follow-up visit within 30 days after the ED visit 2. Received a follow-up visit within 7 days after the ED visit			No provider type restrictions - must have a principal AOD diagnosis
<b>Follow-Up After High-Intensity Care for Substance Use Disorder *</b>	This measure evaluates patients 13 and older with new opioid use disorder (OUD) pharmacotherapy events for 180 or more days with a diagnosis of OUD			No provider type restrictions - must have a principal OUD diagnosis
<b>Pharmacotherapy for Opioid Use Disorder*</b>	This measure evaluates patients 16 years of age and older who were treated in the acute inpatient hospital, residential treatment or detoxification visits with a principal substance abuse diagnosis and who had an outpatient follow-up visit with any practitioner with a principal AOD diagnosis 1. Received a follow-up visit within 30 days after the ED visit 2. Received a follow-up visit within 7 days after the ED visit			No provider type restrictions - must have a principal OUD diagnosis
<b>Adherence to Antipsychotic Medications for Individuals With Schizophrenia*</b>	This measure evaluates patients 18 years of age and older with schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80% of treatment period.	Includes: • Phenothiazine antipsychotics (oral) • Thioxanthenes • Long-acting injections • Miscellaneous antipsychotic agents (oral) • Psychotherapeutic combinations (Amitriptyline-perphenazine) • Miscellaneous CNS agents (i.e. Memantine) • Cholinesterase inhibitors		No provider type restrictions

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## MEDICATION MANAGEMENT AND COORDINATION OF CARE

<b>Medication Reconciliation Post-Discharge</b>	<p>Medication reconciliation done the date of discharge through 30 days after discharge (acute and nonacute inpatient stays) from January 1-December 1 of the measurement year for 18 years of age and older.</p> <p><i>An outpatient office visit is not required as long as the discharge medications are reconciled with the current medications and documented in the office chart within 30 days of discharge date. Submit the appropriate code with the date indicating when this was performed.</i></p>	<p>CPTII - Medication reconciliation 1111F</p> <p>CPT 99483 - medical exam / care plan</p> <p>Transitional Care Management CPT 99495, 99496</p>	<p>SNOMED CT US Edition - Medication reconciliation 430193006 Med reconciliation by pharmacist 428701000124107</p>	<p>Medication reconciliation conducted by a prescribing practitioner, clinical pharmacist or registered nurse, as documented through either administrative data or medical record review on the date of discharge through 30 days after discharge (31 total days).</p>
<b>Transitions of Care</b>	<p>Adults 18 years of age and older who received each of the following after a discharge.</p> <ul style="list-style-type: none"> <li>• Notification of Inpatient Admission</li> <li>• Receipt of Discharge Information</li> <li>• Patient Engagement After Inpatient Discharge within 30 days (visit to office, home or telehealth and cannot be on discharge date)</li> <li>• Medication Reconciliation Post- Discharge within 30 days</li> </ul> <p><i>An outpatient office visit is not required as long as the discharge medications are reconciled with the current medications and documented in the office chart within 30 days of discharge date. Submit the appropriate code with the date indicating when this was performed.</i></p>	<p>Telephone visits CPT 98966-98968, 99441-99443</p> <p>Transitional Care Management CPT 99495, 99496</p> <p>CPT 99483 - medical exam / care plan</p> <p>CPTII - Medication reconciliation 1111F</p>	<p>SNOMED CT US Edition - Medication reconciliation 430193006 Med reconciliation by pharmacist 428701000124107 Telephone encounter 185317003</p>	<p>Ongoing Care Provider/Primary Care Physician (PCP): A physician or non-physician provider (i.e., Nurse Practitioner) who offers primary care services and assumes responsibility for the patient's care in all care settings.</p>
<b>Follow-Up After Emergency Department Visit for People With High-Risk Multiple Chronic Conditions*</b>	<p>Adults 18 years of age and older who have high-risk multiple chronic conditions who had a follow-up service within 7 days of the ED visit.</p> <p>Includes visits to office, telehealth, and telephone</p>	<p>Transitional Care Management Services CPT 99495, 99496</p> <p>Telephone visits CPT 98966-98968, 99441-99443</p> <p>Complex Care Management Services CPT 99487, 99489, 99490 HCPCS G0506</p> <p>Case Management Encounter CPT 99366 HCPCS - T1016, T1017, T2022, T2023</p>	<p>SNOMED CT US Edition 185317003 - telephone encounter 386473003 - telephone follow-up 386230005 - case management 416341003 - case management started 425604002 - case management follow-up</p>	<p>Ongoing Care Provider/Primary Care Physician (PCP): A physician or non-physician provider (i.e., Nurse Practitioner) who offers primary care services and assumes responsibility for the patient's care.</p>
<b>INR<sup>1</sup> Monitoring for Individuals on Warfarin*</b>  ( <sup>1</sup> International Normalized Ratio)	<p>Adults 18 years of age and older who have had at least one 56-day interval of warfarin therapy and received at least one INR monitoring test during each 56-day interval with active warfarin therapy in the measurement year.</p> <p>Excludes patients who are monitoring INR at home during the treatment period</p>	<p>CPT 85610 - Prothrombin time</p> <p>LOINC 34714-6 INR blood by coagulation assay 6301-6 INR in platelet poor plasma by coagulation assay 38875-1 INR in platelet poor plasma or blood by coagulation assay 46418-0 INR in capillary blood by coagulation assay 52129-4 INR in platelet poor plasma by coagulation - post heparin adsorption</p> <p>Excludes G0248 - demonstrate use home INR monitor G0249 - provide test mats &amp; equip home INR G0250 - MD INR test review inter mgmt</p>		<p>No provider type restrictions</p>



HEDIS Measure	Required Documentation	CPT, HCPCS, LOINC and CPT II Performance Codes	Diagnosis/Procedure Codes, ICD-10 CM and SNOMED CT US Edition	Provider Specialty
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## OVERUSE/APPROPRIATENESS

<b>Non-Recommended Cervical Cancer Screening in Adolescent Females*</b>	<p>Avoidance of unnecessary cervical cancer screening for females 16-20 years of age.</p> <p>The USPSTF recommends against screening adolescent females less than 21 because there is adequate evidence that screening this age group does not reduce cervical cancer incidence and mortality compared with beginning at age 21.</p> <p>Exclusions: History of cervical cancer, HIV, Immunodeficiency</p> <p><a href="#">Refer to Provider Resource Center: Adult Preventive Health Guidelines</a></p>			No provider type restrictions
<b>Non-Recommended PSA-Based Screening in Older Men*</b>	<p>Avoidance of unnecessary prostate cancer screening in men 70 years of age and older using prostate-specific antigen (PSA)-based screening.</p> <p>Excludes men who had a diagnosis for PSA-based testing when clinically appropriate:</p> <ul style="list-style-type: none"> <li>• Prostate cancer diagnosis anytime in the patient's history</li> <li>• Dysplasia of the prostate in the measurement year or prior year</li> <li>• PSA test performed in prior year with a result &gt;4.0ng/mL</li> <li>• Abnormal PSA test or finding in measurement year or prior year</li> <li>• Dispensed prescription for 5-alpha reductase inhibitor (5-AR) during measurement year.</li> </ul> <p><a href="#">Refer to Provider Resource Center: Adult Preventive Health Guidelines</a></p>			No provider type restrictions
<b>Appropriate Treatment for Upper Respiratory Infection*</b>	<p>Avoidance of unnecessary prescription for an antibiotic within 3 days of a visit for children 3 months of age and older diagnosed with URI.</p>			No provider type restrictions
<b>Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis *</b>	<p>Avoidance of unnecessary prescription for an antibiotic for 3 months of age and older diagnosed with acute bronchitis/bronchiolitis (in the absence of comorbid or other infection).</p>			No provider type restrictions
<b>Use of Imaging Studies for Low Back Pain*</b>	<p>Avoidance of unnecessary imaging studies (plain x-ray, MRI, CT Scan) for adults 18 and older with a primary diagnosis of low back pain (in the absence of cancer, recent trauma, HIV, IV drug abuse, spinal infection, prolonged corticosteroid use, transplant and neurological impairment) within 28 days of the diagnosis.</p>			No provider type restrictions
<b>Use of High-Risk Medications in Older Adults*</b>	<p>Avoidance of high-risk medications for adults age 66 and older.</p> <p>Members who received at least two dispensing events for the same high-risk medication during the measurement year</p> <p>Patients in Hospice are excluded from this measure</p>	<p>High-Risk Medications include:</p> <ul style="list-style-type: none"> <li>• Alpha agonists, central &gt;0.1mg/day</li> <li>• Anticholinergics, first generation antihistamines</li> <li>• Anticholinergics, anti-Parkinson agents</li> <li>• Anti-infectives &gt;90 days</li> <li>• Antispasmodics</li> <li>• Antithrombotics</li> <li>• Cardiovascular, alpha agonists, central</li> <li>• Cardiovascular, other (i.e., Digoxin &gt;0.125mg/day, Disopyramide, Nifedipine IR)</li> <li>• CNS, antidepressants</li> <li>• CNS, barbiturates</li> <li>• CNS, vasodilators</li> <li>• CNS, Other (Meprobamate)</li> <li>• Endocrine system medications</li> <li>• Nonbenzodiazepine hypnotics &gt;90 days</li> <li>• Pain medications, skeletal muscle relaxants</li> <li>• Pain medications (i.e., Indomethacin, Ketorolac, Meperidine)</li> <li>• Tertiary TCAs, Doxepin &gt;6mg/day</li> </ul>		Applicable to all provider types

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<b>Potentially Harmful Drug-Disease Interactions in Older Adults*</b>	<p>Avoidance of prescription medications for adults age 65 and older with underlying disease, condition or health concern concurrent with or after diagnosis of:</p> <ul style="list-style-type: none"> <li>• A history of falls and a Rx for anticonvulsants, SSRIs, antipsychotics, benzodiazepines, nonbenzodiazepine hypnotics or tricyclic antidepressants.</li> <li>• Dementia and a Rx for antipsychotics, benzodiazepines, nonbenzodiazepine hypnotics, tricyclic antidepressants, H2 receptor antagonists or anticholinergic agents</li> <li>• CRF and Rx for nonaspirin NSAIDs or COX-2 selective NSAIDs</li> </ul> <p>Patients in Hospice are excluded from this measure</p>	<p>Potentially Harmful Drugs:</p> <ul style="list-style-type: none"> <li>• Anticonvulsants</li> <li>• Anticholinergic agents; antiemetics, antihistamines, antispasmodics, antimuscarinics (oral), anti-Parkinson agents, skeletal muscle relaxants, antiarrhythmic,</li> <li>• SSRIs, SNRIs</li> <li>• Antipsychotics</li> <li>• Benzodiazepines</li> <li>• Cholinesterase inhibitors</li> <li>• Cox-2 Selective NSAIDs</li> <li>• Nonaspirin NSAIDs</li> <li>• Miscellaneous central nervous system agents (Memantine)</li> <li>• Nonbenzodiazepine hypnotics</li> <li>• Tricyclic antidepressants</li> </ul>		No provider type restrictions
<b>Use of Opioids at High Dosage*</b>	<p>Avoidance of unnecessary prescriptions of high dose opioids for ≥15 days ages 18 and older (high dosage is based on average morphine equivalent dose [MED] ≥90 mg).</p> <p>Intent: High dosage, multiple prescribers and pharmacies are all risk factors for dangerous overdose and death. These measures add health plans to the group of stakeholders currently addressing the opioid epidemic. Does not include diagnosis of cancer or sickle cell disease.</p> <p>Excludes: injectibles, opioid based cough/cold medicine, Lonsys, single agent and combination Buprenorphine. Also excludes Methadone for the treatment of opioid use disorder.</p>			Applicable to all provider types
<b>Use of Opioids From Multiple Providers*</b>	<p>Avoidance of unnecessary prescriptions of opioids ages 18 and older from multiple providers and multiple pharmacies:</p> <p>Members receiving prescriptions for opioids from 4 or more different providers</p> <p>Members receiving prescriptions for opioids from 4 or more different pharmacies</p> <p>Members receiving prescriptions for opioids from 4 or more different prescribers and 4 or more different pharmacies</p> <p>Excludes: injectibles, opioid based cough/cold medicine, Lonsys, single agent and combination Buprenorphine. Also excludes Methadone for the treatment of opioid use disorder.</p>			Applicable to all provider types
<b>Risk of Continued Opioid Use*</b>	<p>Avoidance of unnecessary prescriptions of high dose opioids for ages 18 and older who have a new episode of opioid use that puts them at risk for continued opioid use.</p> <ul style="list-style-type: none"> <li>• New episode of opioid use that lasts at least 15 days in a 30 day period</li> <li>• New episode of opioid use that lasts at least 30 days in a 62 day period</li> </ul> <p>Does not include diagnosis of cancer or sickle cell disease. Also excludes Methadone for the treatment of opioid use disorder.</p>			Applicable to all provider types

HEDIS Measure	Required Documentation	CPT, HCPCS, LOINC and CPT II Performance Codes	Diagnosis/Procedure Codes, ICD-10 CM and SNOMED CT US Edition	Provider Specialty
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## CAHPS and Senior Survey Measures

<b>Fall Risk Management</b>	<p>Discussing and Managing Fall Risk</p> <ul style="list-style-type: none"> <li>Adults 65-and older who were seen in the office and discussed falls or problems with balance or walking with their current practitioner.</li> <li>Adults 65 and older who had a fall or problems with balance or walking in the past 12 months and received a recommendation for how to prevent falls or treat problems with balance or walking from their current practitioner.</li> </ul> <p><a href="#">Refer to Provider Resource Center: Preventive Health Guidelines for Adults over 65</a></p>			Applicable to all provider types
<b>Management of Urinary Incontinence in Older Adults</b>	<p>Adults 65 years and older (both male and females) who reported having a leakage problem in the past 6 months</p> <ul style="list-style-type: none"> <li>Discussing Urinary Incontinence</li> <li>Discussing Treatment of Urinary Incontinence</li> <li>Impact of Urinary Incontinence including interference with sleep or daily activities.</li> </ul>			Applicable to all provider types
<b>Osteoporosis Testing in Older Women</b>	<p>Women 65 - 85 years of age who reported having a bone density test (hip and spine) to check for osteoporosis</p> <p><a href="#">Refer to Provider Resource Center: Preventive Health Guidelines for Adults over 65</a></p>			Applicable to all provider types
<b>Physical Activity in Older Adults</b>	<p>Discussing Physical Activity</p> <ul style="list-style-type: none"> <li>Adults 65 and older who spoke with a doctor about their level of exercise or physical activity</li> <li>Adults 65 and older who received advice to start, increase or maintain their level of exercise or physical activity</li> </ul>			Applicable to all provider types
<b>Flu Vaccinations for Adults</b>	<p>Influenza vaccination</p> <ul style="list-style-type: none"> <li>Ages 18-64</li> <li>Ages 65 and older</li> </ul> <p><a href="#">Refer to Provider Resource Center: Preventive Health Guidelines for Adults 19 to 64 and Adults over 65</a></p>			Applicable to all provider types
<b>Medical Assistance With Smoking and Tobacco Use Cessation</b>	<ul style="list-style-type: none"> <li>Advising Smokers and Tobacco Users to Quit</li> <li>Discussing Cessation Medications</li> <li>Discussing Cessation Strategies</li> </ul> <p><a href="#">Refer to Provider Resource Center: Preventive Health Guidelines for Adults 19 to 64 and Adults over 65</a></p>			Applicable to all provider types
<b>Pneumococcal Vaccination Status for Older Adults</b>	<ul style="list-style-type: none"> <li>Adults 65 and older receiving a pneumococcal vaccine</li> </ul> <p><a href="#">Refer to Provider Resource Center: Preventive Health Guidelines for Adults over 65</a> <a href="http://www.immunize.org/cdc/schedules/">Refer to: www.immunize.org/cdc/schedules/</a></p>			Applicable to all provider types

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### Access and Availability of Care

<b>Annual Dental Visit*</b>	This measure evaluates 2-20 year olds who had at least one dental visit during the measurement year			Dental Practitioner
<b>Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment*</b>	This measure evaluates adolescent (13 and older) and adults with a new episode of alcohol or other drug abuse or dependence (AOD) who received the following: <ul style="list-style-type: none"> <li>• Initiation of Treatment within 14 days of the diagnosis</li> <li>• Engagement of Treatment with two or more additional services/visits with a diagnosis of AOD within 34 days of the initiation visit</li> </ul>			Inpatient AOD admission, outpatient treatment, intensive outpatient or partial hospitalization
<b>Prenatal and Postpartum Care</b>	Timeliness of Prenatal Care - prenatal care beginning in the first trimester of pregnancy  Postpartum Care - postpartum visit on or between 7 - 84 days after delivery  The intent is to assess whether prenatal and preventive care was rendered on a routine, outpatient basis rather than assessing treatment for emergent events.	Prenatal Care Visit CPT II - 0500F, 0501F, 0502F  Postpartum Care Visit CPT II - 0503F	Postpartum Care Visit Z01.411 Encounter for gyne exam with abnormal findings Z01.419 Encounter for gyne exam without abnormal findings Z01.42 Encounter for cervical smear to confirm findings of recent nml smear following initial abn smear Z30.430 Encounter for insertion of intrauterine contraceptive device Z39.1 Encounter for care and examination of lactating mother Z39.2 Encounter for routine postpartum follow-up  <b>SNOMED CT US Edition</b> 384633003- Postpartum examination and care of mother 409018009- Postpartum care assessment 409019001- Postpartum care mgmt 440085006 - Home visit for postpartum care 717810008 - Routine Post partum follow up	OB/GYN Certified Nurse Midwife, Nurse Practitioner or Physician Assistant who delivers Prenatal Care services in a specialty setting (under the direction of an OB/GYN certified or accredited provider)  Family Practitioner or other PCP
<b>Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics*</b>	The percentage of children and adolescents 1–17 years of age who had a new prescription for antipsychotic medication and had documentation of psychosocial care as first-line treatment.	Includes: <ul style="list-style-type: none"> <li>• Phenothiazine antipsychotics</li> <li>• Thioxanthenes</li> <li>• Long-acting injections</li> <li>• Misc antipsychotic agents</li> <li>• Psychotherapeutic combinations</li> </ul>		Behavioral specialists

### Utilization and Risk Adjusted Utilization

<b>Well Care Visits (all ages):</b> <ul style="list-style-type: none"> <li>• First 15 Months of Life</li> <li>• 3-6 Years of age</li> <li>• Adolescents</li> </ul>	A well-child visit with a PCP including the following: <ul style="list-style-type: none"> <li>• Health history</li> <li>• Physical developmental history</li> <li>• Mental developmental history</li> <li>• Physical exam</li> <li>• Health education/anticipatory guidance</li> </ul> 15 Months: looking for up to 6 or more visits  3-6 years of age and Adolescents 12 - 21 years of age looking for one well-child visit in the measurement year.  <a href="#">Refer to Provider Resource Center: Pediatric Preventive Health Guidelines; Well Child Exam at www.aap.org</a>  <a href="#">Refer to Bright Futures: https://brightfutures.org</a> Handouts alone without discussion do not meet	15 Months CPT- 99381-99382, 99391, 99392, 99461 HCPCS - G0438, G0439  3-6 years CPT- 99382, 99383, 99392, 99393 HCPCS - G0438, G0439  Adolescents CPT- 99384, 99385, 99394, 99395 HCPCS - G0438, G0439	All Ages Z00.121 Encounter for routine child exam with abn findings Z00.129 Encounter for routine child health exam without abn findings Z00.8 Encounter for other general exam  15 Months Z00.110 Health exam for newborn under 8 days old Z00.111 Health exam for newborn 8 to 28 days old  Adolescents Z02.0 Encounter for exam for admission to educational institution Z02.1 Encounter for pre-employment exam Z02.4 Encounter for exam for driving license Z02.5 Encounter for exam for participation in sport	PCP, Pediatrician OB/GYN - age appropriate females
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updated 11/13/2019

\*Indicates measures that will be collected and reported from administrative claims data only and are not part of the medical record review process

LOINC is a code describing Logical Observation Identifier Names & Codes

SNOMED CT US Edition = Systematized Nomenclature of Medicine -- Clinical Terms) is a standardized, multilingual vocabulary of clinical terminology that is used by physicians and other health care providers for the electronic exchange of clinical health information. SNOMED included is a subset of the total list available.

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