

# Quick Reference Guide HEDIS® 2020



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# HEDIS® Quick Reference Guide

Updated to reflect NCQA HEDIS® 2020 Technical Specifications

Sunflower Health Plan strives to provide quality healthcare to our membership as measured through HEDIS® quality metrics. We created the HEDIS® 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.

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## **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

## QUESTIONS?

 [www.SunflowerHealthPlan.com](http://www.SunflowerHealthPlan.com)

 **877-644-4623**

Providers and other health care staff should document to the highest specificity to aid with the most correct coding choice.

Ancillary staff:

Please check the tabular list for the most specific ICD-10 code choice.

This guide has been updated with information from the release of the HEDIS® 2020 Volume 2 Technical Specifications by NCQA and is subject to change.

CPT, CPT II, HCPCS and ICD-10 codes are shared as guides and do not guarantee payment.

 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, 99304 - 99310, 99315, 99316, 99318, 99324 - 99328, 99334 - 99337, 98966 - 98968, 99441 - 99443, 98969, 99444, 99483	G0402, G0438, G0439, G0463, T1015, S0620, S0621	Z00.00, Z00.01, Z00.121, Z00.129, Z00.3, 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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## (ABA) ADULT BMI ASSESSMENT

This measure demonstrates the percentage of members ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the year or the year prior.

- 1) For patients 20 and over: code the BMI value on the date of service.
- 2) For patients younger than 20: code the BMI percentile on the date of service.
- 3) Ranges and thresholds do NOT meet criteria; a distinct BMI value or percentile is required.

ICD-10 : BMI VALUE SET (AGE 20+)	ICD-10: BMI PERCENTILE VALUE SET (AGE YOUNGER THAN 20)
Z68.1, Z68.20, Z68.21, Z68.22, Z68.23, Z68.24, Z68.25, Z68.26, Z68.27, Z68.28, Z68.29, Z68.30, Z68.31, Z68.32, Z68.33, Z68.34, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45	Z68.51, Z68.52, Z68.53, Z68.54

\*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		
<b>Miscellaneous antidepressants</b>	• Bupropion	• Vilazodone	• Vortioxetine
<b>Monoamine oxidase inhibitors</b>	• Isocarboxazid • Tranylcypromine	• Selegiline	• Phenelzine
<b>Phenylpiperazine antidepressants</b>	• Nefazodone	• Trazodone	
<b>Psychotherapeutic combinations</b>	• Amitriptyline-chlordiazepoxide • Amitriptyline-perphenazine		• Fluoxetine-olanzapine
<b>SNRI antidepressants</b>	• Desvenlafaxine • Levomilnacipran	• Duloxetine	• Venlafaxine
<b>SSRI antidepressants</b>	• Citalopram • Fluvoxamine	• Escitalopram • Paroxetine	• Fluoxetine • Sertraline
<b>Tetracyclic antidepressants</b>	• Maprotiline	• Mirtazapine	

\*Antidepressant Medications continue on next page

**Antidepressant Medications (Continued)**

DESCRIPTION	PRESCRIPTION		
<b>Tricyclic antidepressants</b>	• Amitriptyline • Desipramine • Nortriptyline	• Amoxapine • Doxepin (>6 mg) • Protriptyline	• Clomipramine • Imipramine • Trimipramine

\*Codes subject to change

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**(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	PRESCRIPTION
<b>Hypertension</b>	<b>ICD-10:</b> I10
<b>Systolic greater than/equal to 140</b>	CPT-CAT-II: 3077F
<b>Systolic less than 140</b>	CPT-CAT-II: 3074F, 3075F
<b>Diastolic greater than/equal to 90</b>	CPT-CAT-II: 3080F
<b>Diastolic 80-89</b>	CPT-CAT-II: 3079F
<b>Diastolic less than 80</b>	CPT-CAT-II: 3078F
<b>Remote Blood Pressure Monitoring codes</b>	CPT: 93784, 93788, 93790, 99091
<b>Outpatient codes</b>	CPT: 99201 - 99205, 99211 - 99215, 99241 - 99245, 99347 - 99350, 99381 - 99387, 99391 - 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, 99455, 99456, 99483, 99341-99345 HCPCS: G0402, G0438, G0439, G0463, T1015
<b>Non-acute Inpatient codes</b>	CPT: 99304 - 99310, 99315, 99316, 99318, 99324 - 99328, 99334 - 99337

\*Codes subject to change

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(CDC) COMPREHENSIVE DIABETES CARE

Measure evaluates percentage of members 18-75 years of age with diabetes (type 1 and type 2) who had each of the following:

- Hemoglobin A1c (HbA1c) testing
  - HgA1c poor control (>9.0%)
  - HgbA1c control (<8.0%)
  - HbA1c control (<7.0%)
- Eye exam (retinal) performed
  - Medical attention for nephropathy
  - BP control (<140/90 mm Hg)

DESCRIPTION	CODES
Outpatient Codes	CPT: 99201 - 99205, 99211 - 99215, 99241 - 99245, 99347 -99350, 99381 - 99387, 99391 - 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, 99455, 99456, 99483, 99341-99345 HCPCS: G0402, G0438, G0439, G0463, T1015
Non-acute Inpatient	CPT: 99304 - 99310, 99315, 99316, 99318, 99324 - 99328, 99334, -99337
Remote BP Monitoring	CPT: 93784, 93788, 93790, 99091
Diastolic 80-89	CPT: 93784, 93788, 93790, 99091
Diastolic Greater Than/Equal To 90	CPT-CAT-II: 3079F
Diastolic Less Than 80	CPT-CAT-II: 3080F
Systolic Greater Than/Equal To 140	CPT-CAT-II: 3078F
Systolic Less Than 140	CPT-CAT-II: 3074F, 3075F
Diabetic Retinal Screening With Eye Care Professional	CPT-CAT-II: 2022F, 2024F, 2026F
Unilateral Eye Enucleation with a bilateral modifier	CPT: 65091, 65093, 65101, 65103, 65105, 65110, 65112, 65114 CPT Modifier: 50
HbA1C Lab Test	CPT: 83036, 83037 CPT-CAT-II: 3044F, 3051F, 3046F
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: 83036, 83037 CPT-CAT-II: 3046F
Urine Protein Tests	CPT: 81000 - 81003, 81005, 82042 - 82044, 84156 CPT: 81000 - 81003, 81005, 82042 - 82044, 84156 CPT-CAT-II: 3060F, 3061F, 3062F
Nephropathy Treatment	CPT-CAT-II: 3066F, 4010F

\*Codes subject to change





## (COA) CARE FOR OLDER ADULTS

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

- Advanced care planning
- Medication review
- Functional status assessment
- Pain assessment

DESCRIPTION	CODES
<b>Advanced Care Planning</b>	CPT: : 99483, 99497 CPT-CAT-II: 1123F, 1124F, 1157F, 1158F HCPCS: S0257 ICD-10: Z66 Z66
<b>Medication Review</b> <b>Would need both CPT-CAT II codes to get credit. 1159F (Medication List) &amp; 1160F (Medication Review)</b>	CPT: : 90863, 99605, 99606, 99483 CPT-CAT-II: 1159F, 1160F HCPCS: G8427
<b>Functional Status Assessment</b>	CPT: 99483 CPT-CAT-II: 1170F HCPCS: G0438, G0439
<b>Pain Assessment</b>	CPT-CAT-II: 1125F, 1126F

\*Codes subject to change

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## (COL) COLORECTAL CANCER SCREENING

Measure evaluates the percentage of members 50-75 years of age who has appropriate screening for colorectal cancer.

DESCRIPTION	CODES
<b>Colonoscopy</b>	CPT: 44388 - 44394, 44397, 44401 - 44408, 45355, 45378 - 45393, 45398 HCPCS: G0105, G0121
<b>CT Colonography</b>	CPT: 74261 - 74263
<b>FIT- DNA Lab Test</b>	CPT: 81528 HCPCS: G0464
<b>Flexible Sigmoidoscopy</b>	CPT: 45330 - 45335, 45337 - 45342, 45345 - 45347, 45349 - 45350 HCPCS: G0104
<b>FOBT Lab Test</b>	CPT: 82270, 82274 HCPCS: G0328
<b>Colorectal Cancer</b>	HCPCS: G0213, G0214, G0215, G0231 ICD-10: C18.0 - C18.9, C19, C20, C21.2, C21.8, C78.5, Z85.038, Z85.048
<b>Total Colectomy</b>	CPT: 44150 - 44153, 44155 - 44158, 44210 - 44212

\*Codes subject to change

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**(MRP) MEDICATION RECONCILIATION POST DISCHARGE**

Measure evaluates the percentage of discharges from January 1-December 1 for members 18 years of age or older for whom medications were reconciled the date of discharge through 30 days after discharge (31 total days).

CPT	CPT-CAT-II
99495, 99496, 99483	1111F

\*Codes subject to change

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**(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-Blocker Medications**

DESCRIPTION	PRESCRIPTION		
<b>Noncardioselective beta-blockers</b>	• Carvedilol • Pindolol • Sotalol	• Labetalol • Propranolol	• Nadolol • Timolol
<b>Cardioselective beta-blockers</b>	• Acebutolol • Atenolol	• Betaxolol • Bisoprolol	• Metoprolol • Nebivolol
<b>Antihypertensive combinations</b>	• Atenolol-chlorthalidone • Bendroflumethiazide-nadolol • Bisoprolol-hydrochlorothiazide • Hydrochlorothiazide-metoprolol • Hydrochlorothiazide-propranolol		

\*Codes subject to change

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**(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:

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>	• Cortisone-acetate    • Hydrocortisone    • Prednisolone • Dexamethasone    • Methylprednisolone    • Prednisone

\*Codes subject to change

**Bronchodilator Medications**

DESCRIPTION	PRESCRIPTION
<b>Anticholinergic agents</b>	• Albuterol-ipratropium    • Ipratropium    • Umeclidinium • Acclidinium-bromide    • Tiotropium
<b>Beta 2-agonists</b>	• Albuterol    • Indacaterol-glycopyrrolate • Arformoterol    • Levalbuterol • Budesonide-formoterol    • Formoterol-mometasone • Fluticasone-salmeterol    • Metaproterenol • Fluticasone-vilanterol    • Olodaterol hydrochloride • Formoterol    • Olodaterol-tiotropium • Formoterol-glycopyrrolate    • Salmeterol • Indacaterol    • Umeclidinium-vilanterol
<b>Antiasthmatic combinations</b>	• Dyphylline-guaifenesin

\*Codes subject to change

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**(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 during the year.

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

\*Codes subject to change

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**(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

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**(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 during the year.

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

\*Codes subject to change

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# 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.

CPT	HCPCS	ICD-10 (BILATERAL MASTECTOMY)
77055 - 77057, 77061 - 77063, 77065 - 77067	G0202, G0204, G0206	Z90.13

\*Codes subject to change

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## (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) cotesting within the last 5 years.

DESCRIPTION	CODES
<b>Cervical Cytology Lab Test (21-64)</b>	CPT: 88141 - 88143, 88147, 88148, 88150, 88152 - 88154, 88164 - 88167, 88174, 88175 HCPCS: G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091
<b>HPV Tests (30-64)</b>	CPT: 87620 - 87622, 87624, 87625 HCPCS: G0476

\*Cervical Cancer Screenings continue on next page

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

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

DESCRIPTION	CODES
<b>Hysterectomy with No Residual Cervix and Absence of Cervix Diagnosis</b>	CPT: 51925, 56308, 57540, 57545, 57550, 57555, 57556, 58150, 58152, 58200, 58210, 58240, 58260, 58262, 58263, 58267, 58267, 58270, 58275, 58280, 58285, 58290-58294, 58548, 58550, 58552-58554, 58570-58573, 58575, 58951, 58953, 58954, 59856, 59135 ICD-10: Q51.5, Z90.710, Z90.712

\*Codes subject to change

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**(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 during the year.

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

\*Codes subject to change

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**(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
<b>Bone Mineral Density Tests</b>	CPT: 76977, 77078, 77080 - 77082, 77085, 77086
<b>Osteoporosis Medications</b>	HCPCS: J0897, J1740, J3110, J3489
<b>Long-Acting Osteoporosis Medications during Inpatient Stay</b>	HCPCS: J0897, J1740, J3489

\*Codes subject to change

### Osteoporosis Medications

DESCRIPTION	CODES
<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>• Abaloparatide</li> <li>• Denosumab</li> <li>• Raloxifene</li> <li>• Teriparatide</li> </ul>

\*Codes subject to change

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### (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
<b>Prenatal Visits</b>	CPT: 99201 - 99205, 99211 - 99215, 99241 - 99245, 99483 CPT-CAT-II: G0463, T1015
<b>Stand Alone Prenatal Visits</b>	CPT: 99500 CPT-CAT-II: 0500F, 0501F, 0502F HCPCS: H1000, H1001, H1002, H1003, H1004
<b>Postpartum Visits</b>	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
<b>Cervical Cytology Lab Test</b>	CPT: 88141 - 88143, 88147, 88148, 88150, 88152 - 88154, 88164 - 88167, 88174, 88175 HCPCS: G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091

\*Codes subject to change

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# 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:

- Initiation Phase: percentage of members 6-12 years of age as of the IPSP 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 of age as of the IPSP 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) after the Initiation Phase ended.

DESCRIPTION	CODES
<b>An Outpatient Visit</b>	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
<b>BH Outpatient Visit</b>	CPT: 98960 - 98962, 99078, 99201 - 99205, 99211 - 99215, 99241 - 99245, 99341 - 99345, 99347 - 99350, 99381 - 99387, 99391 - 99397, 99401 - 99404, 99411, 99412, 99510, 99483 HCPCS: G0155, G0176, G0177, G0409, G0463, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, M0064, T1015

\*Follow up Care for Children Prescribed ADHD Medication continued on next page



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

DESCRIPTION	CODES
Observation Visit	CPT: 99217 - 99220
Health and Behavior Assessment/Intervention	CPT: 96150 - 96154
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
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

\*Codes subject to change

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**(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:

- 1) 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 LDL-C)	CODES
HbA1C Lab Tests	CPT: 83036, 83037 CPT-CAT-II: 3044F, 3051F, 3046F
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

\*Codes subject to change

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## (CAP) CHILDREN'S AND ADOLESCENTS ACCESS TO PRIMARY CARE PRACTITIONERS

This measure demonstrates the percentage of members 12 months-19 years of age who had a visit with a PCP

- 1) Children 12-24 months and 25 months-6 years who had a visit with a PCP during the measurement year
- 2) Children 7-11 years and adolescents 12-19 years who had a visit with a PCP during the measurement year or the year prior to the measurement year

CPT	HCPCS	ICD-10
99201 - 99205, 99211 - 99215, 99241 - 99245, 99341 - 99345, 99347 - 99350, 99381 -99387, 99391 - 99397, 99401 -99404, 99411, 99412, 99429, 99483, 98969, 99444, 98966, 98967, 98968, 98969, 99441, 99442, 99443, 99444	G0402, G0438, G0439, G0463, T1015	Z00.00, Z00.01, Z00.121, Z00.129, Z00.3, 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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## (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
<b>DTaP (4 dose)</b>	CPT: 90698, 90700, 90721, 90723 CVX: 20, 50, 106, 107, 110, 120
<b>HIB (3 dose)</b>	CPT: 90644, 90645, 90646, 90647, 90648, 90698, 90721, 90748 CVX: 17, 46, 47, 48, 49, 50, 51, 120, 148
<b>Hep B (3 dose)</b> One of the three Hep B can be newborn Hep B (or hepatitis history by age 2)	CPT: 90723, 90740, 90744, 90747, 90748 CVX: 08, 44, 45, 51, 110 HCPCS: G0010 ICD-10: B16.0, B16.1, B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11, Z22.51
<b>IPV (3 dose)</b>	CPT: 90698, 90713, 90723 CVX: 10, 89, 110, 120

\*Immunizations continue on next page

## (CIS) CHILDHOOD IMMUNIZATION STATUS (CONTINUED)

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

DESCRIPTION	CODES
<b>MMR (1 dose)</b>	CPT: 90705, 90707, 90710, 90708, 90704, 90706 CVX: 05, 03, 94, 04, 07, 06 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
<b>Pneumococcal Conjugate PCV (4 dose)</b>	CPT: 90670 CVX: 133, 152 HCPCS: G0009
<b>Varicella VZV (1 dose) or history of Chicken Pox before age 2</b>	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
<b>Hep A (1 dose) or history of Hepatitis A before age 2</b>	CPT: 90633 CVX: 31, 83, 85 ICD-10: B15.0, B15.9
<b>Influenza (2 dose)</b>	CPT: 90655, 90657, 90661, 90662, 90673, 90685, 90686, 90687, 90688, 90689, 90660, 90672 CVX: 88, 135, 140, 141, 150, 153, 155, 158, 161, 111, 149 HCPCS: G0008
<b>Rotavirus (2 Dose)</b>	CPT: 90681 CVX: 119
<b>Rotavirus (3 Dose)</b>	CPT: 90680 CVX: 116, 122

\*Codes subject to change

\*Rotavirus is either 2 dose OR 3 dose for compliancy

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

\*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



(W15/W34/AWC) WELL-CHILD AND ADOLESCENT WELL-CARE VISITS

Components of a comprehensive well-care visit include: A health history, a physical developmental history, a mental developmental history, a physical exam, and health education/anticipatory guidance. Visits must be with a PCP, and assessment or treatment of an acute or chronic condition do not count towards the measure. Be sure to use age-appropriate codes.

(W15) Well-Child Visits in the First 15 Months of Life: Assesses children who turned 15 months old during the measurement year and had 0–6 well-child visits with a primary care physician during their first 15 months of life.

CPT	HCPCS	ICD-10
99381, 99382, 99391, 99392, 99461	G0438, G0439	Z00.110, Z00.111, Z00.121, Z00.129, Z00.8, Z02.0, Z02.71, Z02.82, Z00.5

\*Codes subject to change



(W34) Well-Child Visits First 3-6 Years of Life: Children 3-6 years of age who had one or more well-child visits with a PCP.

CPT	HCPCS	ICD-10
99382, 99383, 99392, 99393	G0438, G0439	Z00.121, Z00.129, Z00.8, Z02.0, Z02.2, Z02.5, Z02.6, Z02.71, Z02.82

\*Codes subject to change

(AWC) Adolescent Well-Care Visit: Members 12-21 years of age who had at least one comprehensive well-care visit with a PCP or OB/GYN during the measurement year.

CPT	HCPCS	ICD-10
99381-99383, 99384 - 99385, 99391-99393, 99394 - 99395, 99461	G0438, G0439	Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z00.5, Z00.8, Z02.0, Z02.1, Z02.2, Z02.3, Z02.4, Z02.5, Z02.6, Z02.71, Z02.82, Z76.1, Z76.2

\*Codes subject to change

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**(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 Documentation
- Counseling for Nutrition
- Counseling for physical activity

DESCRIPTION	CODES
<b>BMI Percentile</b>	ICD-10: Z68.51, Z68.52, Z68.53, Z58.54
<b>Nutrition Counseling</b>	CPT: 97802, 97803, 97804 HCPCS: G0270, G0271, G0447, S9449, S9452, S9470 ICD-10: Z71.3
<b>Physical Activity Counseling</b>	HCPCS: G0447, S9451 ICD-10: Z02.5, Z71.82

\*Codes subject to change

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# 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.

- For each member, count the units of asthma controller medications (Asthma Controller Medications List) dispensed during the measurement year.
- 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 step 1 and step 2 to determine units of total 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	Subcutaneous
<b>Anti-interleukin-5</b>	• Benralizumab	Benralizumab Medications List	Subcutaneous
<b>Anti-interleukin-5</b>	• Mepolizumab	Mepolizumab Medications List	Subcutaneous
<b>Anti-interleukin-5</b>	• Reslizumab	Reslizumab Medications List	Intravenous

\*Asthma Controller Medications continue on next page



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

### ***Asthma Controller Medications (Continued)***

DESCRIPTION	PRESCRIPTIONS	MEDICATION LISTS	ROUTE
<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

### ***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

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

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## (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 practitioner.

Two rates are reported:

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

Discharges for which the member received follow-up within 7 days after discharge

DESCRIPTION	CODES
<b>Visit Setting Unspecified Value Set with Outpatient POS with Mental Health Practitioner</b>	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
<b>BH Outpatient Visit with Mental Health Practitioner</b>	CPT: 98960 - 98962, 99078, 99201 - 99205, 99211 - 99215, 99241 - 99245, 99341 - 99345, 99347 - 99350, 99381 - 99387, 99391 - 99397, 99401 - 99404, 99411, 99412, 99510, 99483
<b>Visit Setting Unspecified Value Set with Partial Hospitalization POS with Mental Health Practitioner</b>	CPT: 90791, 90792, 90832 - 90834, 90836 - 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221 - 99223, 99231 - 99233, 99238, 99239, 99251 - 99255 POS: 52
<b>Partial Hospitalization/Intensive Outpatient</b>	HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485
<b>Visit Setting Unspecified Value Set with Community Mental Health Center POS</b>	CPT: 90791, 90792, 90832 - 90834, 90836 - 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221 - 99223, 99231 - 99233, 99238, 99239, 99251 - 99255 POS: 53

\*Follow-Up After Hospitalization for Mental Illness continue on next page

## FOLLOW-UP AFTER HOSPITALIZATION FOR MENTAL ILLNESS (CONTINUED)

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 practitioner.

DESCRIPTION	CODES
<b>Electroconvulsive Therapy with Ambulatory Surgical Center POS/ Community Mental Health Center POS/ Outpatient POS/ Partial Hospitalization POS</b>	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, 52
<b>Telehealth Visit</b>	CPT: 90791, 90792, 90832 - 90834, 90836 - 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221 - 99223, 99231 - 99233, 99238, 99239, 99251 - 99255 POS: 02
<b>Observation</b>	CPT: 99217-99220
<b>Transitional Care Management</b>	CPT: 99495, 99496

\*Codes subject to change

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## (IET) INITIATION AND ENGAGEMENT OF ALCOHOL AND OTHER DRUG ABUSE OR DEPENDENCE TREATMENT

Measure evaluates percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following:

- Initiation of AOD Treatment: percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth or medication treatment within 14 days of the diagnosis
- Engagement of AOD Treatment: percentage of members who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit

CPT	HCPCS	POS
98960-98962, 99078, 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99408-99409, 99411-99412, 99510, 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875-90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99483, 99217-99220	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, M0064, S0201, S9480, S9484, S9485, T1006, T1012, T1015	02, 03, 05, 07, 09, 11-20, 22, 33, 49- 50, 52-53, 57, 71-72

\*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.



**(MMA) MEDICATION MANAGEMENT FOR PEOPLE WITH ASTHMA**

This measure demonstrates the percentage of members 5–64 years of age during the measurement year who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period.

- The percentage of members who remained on an asthma controller medication for at least 50% of their treatment period.
- The percentage of members who remained on an asthma controller medication for at least 75% of their treatment period

**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	Subcutaneous
<b>Anti-interleukin-5</b>	• Benralizumab	Benralizumab Medications List	Subcutaneous
<b>Anti-interleukin-5</b>	• Mepolizumab	Mepolizumab Medications List	Subcutaneous
<b>Anti-interleukin-5</b>	• Reslizumab	Reslizumab Medications List	Intravenous
<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

\*Asthma Controller Medications continue on next page

**Asthma Controller Medications (Continued)**

DESCRIPTION	PRESCRIPTIONS	MEDICATION LISTS	ROUTE
<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

**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

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8325 Lenexa Dr., Suite 200 • Lenexa, KS 66214  
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