

Quality Quick Reference Guide Measurement Year 2020-2021



Measure	Requirement	Coding Assistance
A1C Hemoglobin A1C Testing and Control Members 18 - 75 years of age with type I or type II diabetes who had an HbA1C screen (must be < 8) during the measurement year.	Test Needed: HbA1C required at least one time in the measurement year and most recent test results must be < 8.0%. Excludes: Members with a diagnosis of gestational diabetes or steroid-induced diabetes, in any setting, during the measurement year or year prior to the measurement year.	CPT® Code(s): 83036 CPT® II Code(s): 3044F, 3046F, 3051F, 3052F <i>When coding a Hemoglobin A1C Test, it is required to include the CPT II Code with the results of the test. If CPT Codes are used, that portion of the medical record that documents those results must be submitted.</i>
ADD Follow-Up Care for Children Prescribed ADHD Medication Children 6-12 years old newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at test three follow up visits within a 10 month period, one of which was within 30 days of when the first ADHD Medication was dispensed.	Ages 6 - 12 Two rates are reported: <ul style="list-style-type: none"> Initiation Phase. Members 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. Members 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. 	CPT Code(s): 90791, 90792, 90832-90834, 90836-90840, 90847, 90849, 90853, 99201-99205, 99211-99215, 99217-99223, 99231-99233, 99238, 99241-99245, 99251-99255, 99341-99343, 99345, 99347-99350, 99381-99385, 99391-99395, 99401-99402 HCPCS Code(s): H0034, H0035, H2000, H2011, H2014, H2015, H2016, H2017, H2019, H2020, T1015 POS Code(s): 02, 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 52, 53, 71, 72 * Telehealth and telephone visits can be utilized for Initiation Phase. E-visits and virtual check-ins can be utilized for C&M Phase and modified the telehealth restrictions.
AMM Antidepressant Medication Management 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.	Ages 18+: Two rates are reported <ul style="list-style-type: none"> Effective Acute Phase Treatment: Members who remained on an antidepressant medication for at least 84 days (12 weeks). Effective Continuation Phase Treatment: Members who remained on an antidepressant medication for at least 180 days (6 months). 	To satisfy the Effective Acute Phase Treatment: At least 84 days (12 weeks) of treatment with antidepressant medication for 115 total days. To satisfy the Continuation Phase Treatment: At least 180 days (6 months) of treatment with antidepressant medication for 232 total days.
AMR Asthma Medication Ratio Members 5-64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.	Ages 5 - 64: Dispensing Events: <ul style="list-style-type: none"> Oral Medications: One prescription of an amount lasting 30 days or less. Multiple prescriptions for different medications dispensed on the same day are counted as separate dispensing events. Inhalers: All inhalers (i.e., canisters) of the same medication dispensed on the same day count as one dispensing event. Different inhaler medications dispensed on the same day are counted as different dispensing events. Injections: Each injection counts as one dispensing event. Multiple dispensed injections of the same or different medications count as separate dispensing events. 	Asthma Controller Medications: Oral: Dyphylline-guaifenesin, Montelukast, Zafirlukast, Zileuton, Theophylline Inhalation: Budesonide-formoterol, Fluticasone-salmeterol, Fluticasone-vilanterol, Formoterol-mometasone, Beclomethasone, Budesonide, Ciclesonide, Flunisolide, Fluticasone, Mometasone Injection: Omalizumab, Dupilumab, Benralizumab, Mepolizumab, Reslizumab Asthma Reliever Medications: Inhalation: Albuterol, Levalbuterol
BCS Breast Cancer Screening Female members 52 - 74 years of age as of December 31st who had a mammogram to screen for breast cancer.	Age 50 - 74: Mammogram is required two years prior to the measurement year through December 31st of the measurement year. Excludes: <ul style="list-style-type: none"> Bilateral mastectomy Unilateral mastectomy with a bilateral modifier History of bilateral mastectomy Any combination of codes that indicate a mastectomy on both the left and right side on the same or different dates of service 	Mammography Codes: CPT Code(s): 77061, 77062, 77063, 77065, 77066, 77067 Exclusion Codes: CPT Code(s): 19303, 19305, 19306, 19307 ICD-10-CM Code(s): Z90.11, Z90.12, Z90.13 Bilateral modifier codes: 50, LT, RT

Measure	Requirement	Coding Assistance
<p>CBP Controlling Blood Pressure & Diabetes with Controlled Blood Pressure Members 18 - 85 years of age who had a diagnosis of hypertension (HTN) or diabetes and whose BP was adequately controlled (<140/90 mm Hg) during the measurement year.</p>	<p>Ages 18 - 85: Identify the most recent BP reading taken during an outpatient visit, a non-acute inpatient encounter or remote monitoring event.</p> <p>*The most recent (last) BP reading during the measurement year on or after the second diagnosis of hypertension or a diagnosis of diabetes. If multiple BP measurements occur on the same date, or are noted in the chart on the same date, use the lowest systolic and lowest diastolic BP reading.</p>	<p>To Identify Blood Pressure Readings, providers must use appropriate CPT II or HCPCS code(s), in addition to CPT code(s), when submitting claims.</p> <p>CPT II Code(s): 3074F, 3075F, 3077F, 3078F, 3079F, 3080F</p> <p>HCPCS Code(s): G2012, T1015 *Note: Telephone visits, e-visits and virtual check-ins are appropriate settings for BP readings. Requirement: Medical record with last BP of the year is required to close this measure.</p>
<p>CCS Cervical Cancer Screening Female members 21 - 64 years of age who were screened for cervical cancer.</p>	<p>Women 21 - 64 who were screened for cervical cancer using either of the following criteria: Women 21 - 64 years of age who have had a cervical cytology performed within the 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.</p> <p>Excludes: Members who had a prior Hysterectomy with no residual cervix, cervical agenesis or acquired absence of cervix.</p>	<p>Cervical Cytology: CPT Code(s): 88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88164, 88165, 88166, 88167, 88174, 88175</p> <p>HPV Test: CPT Code(s): 87621, 87624, 87625</p>
<p>CHL Chlamydia Screening in Women Women 16 - 24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.</p>	<p>Ages 16 - 24: At least one chlamydia test during the measurement year.</p> <p>*Documentation must include a note indicating the date the test was performed, and the result or finding.</p>	<p>Chlamydia Tests: CPT Code(s): 87110, 87270, 87320, 87490, 87491, 87492, 87810</p>
<p>CIS Childhood Immunization Status Children turning 2 years of age in the measurement year who had the appropriate vaccines by their second birthday</p>	<p>On or before 2nd Birthday: All immunizations must be administered on or prior to the child's second birthday.</p> <ul style="list-style-type: none"> • four (4) diphtheria, tetanus and acellular pertussis (DTaP) • three (3) polio (IPV) • one (1) measles, mumps and rubella (MMR) • three (3) haemophilus influenza type B (HiB) • three (3) hepatitis B (HepB) • one (1) chicken pox (VZV) • four (4) pneumococcal conjugate (PCV) • one (1) hepatitis A (HepA) • two (2) or three (3) rotavirus (RV), and • two (2) influenza (flu) vaccines 	<p>CPT Code(s):</p> <p>DTaP: 90698, 90700, 90723 IPV: 90698, 90713, 90723 MMR: 90707, 90710 HiB: 90647, 90648, 90698, 90748 Hep B: 90723, 90740, 90744, 90747, 90748 VZV: 90710, 90716 PCV: 90670 HepA: 90633 RV: 90680, 90681 Flu: 90655, 90657, 90660, 90661, 90672, 90673, 90685, 90686, 90687, 90688, 90689, HCPCS-G0008</p>
<p>CRE Cardiac Rehabilitation Members 18 years and older, who attended cardiac rehabilitation following a qualifying cardiac event, including myocardial infarction, percutaneous coronary intervention, coronary artery bypass grafting, heart and heart/lung transplantation or heart valve repair/replacement.</p>	<p>Ages 18+: Four Rates are Reported</p> <ol style="list-style-type: none"> 1. <i>Initiation:</i> Attended 2 or more sessions of cardiac rehabilitation within 30 days after a qualifying event. 2. <i>Engagement 1:</i> Attended 12 or more sessions of cardiac rehabilitation within 90 days after a qualifying event. 3. <i>Engagement 2:</i> Attended 24 or more sessions of cardiac rehabilitation within 180 days after a qualifying event. 4. <i>Achievement:</i> Attended 36 or more sessions of cardiac rehabilitation within 180 days after a qualifying event. 	

Measure	Requirement	Coding Assistance
<p>EYE Diabetic Retinal Eye Exam</p> <p>Members 18 - 75 years of age with Type I or Type II diabetes who had a retinal eye exam during the measurement year.</p>	<p>Age 18 - 75: Screening or monitoring for diabetic retinal disease. This includes diabetics who had one of the following:</p> <ul style="list-style-type: none"> • A retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement year. • A negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional in the year prior to the measurement year. • Bilateral eye enucleation any time during the member's history through December 31 of the measurement year. <p><i>If submitted by a PCP, the following CPT codes must be accompanied by a CPT II code to meet the HEDIS specifications indicating the services were performed by a qualified eye care professional.</i></p>	<p>CPT® Code(s): CPT Code(s): 65091, 65093, 65101, 65103, 65105, 65110, 65112, 65114, 67028, 67030, 67031, 67036, 67039-67043, 67101, 67105, 67107, 67108, 67110, 67113, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228, 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92201, 92202, 92230, 92235, 92240, 92250, 92260, 99203-99205, 99213-99215, 99242-99245</p> <p>CPT II Code(s): 2022F, 2023F, 2024F, 2025F, 2026F, 2033F or 3072F (negative for retinopathy in prior year).</p> <p>HCPCS Code(s): S0620, S0621</p>
<p>FUH Follow-Up after Hospitalization for Mental Illness</p> <p>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.</p>	<p>Ages 6+ Two rates are reported:</p> <p>30-Day Follow-Up: A follow-up visit with a mental health practitioner within 30 days after discharge.</p> <p>7-Day Follow-Up: A follow-up visit with a mental health practitioner within 7 days after discharge.</p> <p>* Do not include visits that occur on the date of discharge.</p>	<p>For both rates, any of the following meet criteria for a follow-up visit when rendered by a mental health practitioner:</p> <ul style="list-style-type: none"> • An outpatient visit • An intensive outpatient encounter or partial hospitalization • A community mental health center visit • Electroconvulsive therapy • A telehealth visit • An observation visit • Transitional care management services • A visit in a behavioral healthcare setting • A telephone visit
<p>IMA Immunizations for Adolescents</p> <p>Adolescents 13 years of age who had the following vaccines by their 13th birthday</p>	<p>On or before 13th Birthday: All immunizations must be administered on or prior to child's thirteenth birthday.</p> <ul style="list-style-type: none"> • one (1) dose of meningococcal vaccine • one (1) tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and • the complete human papillomavirus (HPV) vaccine series 	<p>CPT Code(s):</p> <p>Meningococcal: 90734 Tdap: 90715 HPV: 90649, 90650, 90651</p>
<p>KED Kidney Health Evaluation for Patients With Diabetes</p> <p>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.</p>	<p>Ages 18 - 75: Members who received both of the following during the measurement year on the same or different dates of service:</p> <ul style="list-style-type: none"> • At least one eGFR • At least one uACR identified by both a quantitative urine albumin test and a urine creatinine test with service dates four or less days apart. 	<p>CPT Code(s): 80047, 80048, 80050, 80053, 80069, 82043, 82565, 82570</p>

Measure	Requirement	Coding Assistance
<p>SAA Adherence to Antipsychotic Medications for Individuals with Schizophrenia</p> <p>Members 18 years of age and older during the measurement year with schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period.</p>	<p>Ages 18+: Members who achieved a proportion of days covered (PDC) of at least 80% for their antipsychotic medications during the measurement year.</p> <p>Long acting Injections: Risperidone (excluding Perseris®), Aripiprazole, Fluphenazine decanoate, Haloperidol decanoate, Olanzapine, Paliperidone palmitate, Risperidone (Perseris)</p> <p>Oral Antipsychotic Medications: Aripiprazole, Asenapine, Brexpiprazole, Cariprazine, Clozapine, Haloperidol, Iloperidone, Loxapine, Lurasidone, Molindone, Olanzapine, Paliperidone, Quetiapine, Risperidone, Ziprasidone, Chlorpromazine, Fluphenazine, Perphenazine, Prochlorperazine, Thioridazine, Trifluoperazine, Amitriptyline-perphenazine, Thiothixene</p>	<p>HCPCS Code(s): J0401, J1631, J1943, J1944, J2358, J2426, J2680, J2794, J2798</p>
<p>SSD Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications</p> <p>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 measurement year.</p>	<p>Age 18 - 64: A glucose test or an HbA1c test performed during the measurement year.</p>	<p>CPT® Code(s): 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951, 83036</p> <p>CPT®II Code(s): 3044F, 3046F, 3051F, 3052</p>
<p>WCC Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</p> <p>Members 3–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of BMI percentile documentation and Counseling for nutrition and physical activity during the measurement year.</p>	<p>Ages 3 - 17: Documentation in the medical record for the measurement year must indicate:</p> <ul style="list-style-type: none"> • BMI percentile documentation • Counseling for nutrition • Counseling for physical activity <p>Note: Services rendered during a telephone visit, e-visit or virtual check-in meet criteria for the Counseling for Nutrition and Counseling for Physical Activity indicators.</p>	<p>To identify BMI percentile: ICD-10-CM Code(s): Z68.51 -Z68.54</p> <p>To identify nutrition counseling: CPT Code(s): 97802, 97803 HCPCS Code(s): S9470 ICD-10-CM Code(s): Z71.3</p> <p>To identify physical activity counseling: ICD-10-CM Code(s): Z02.5, Z71.82</p>
<p>WCV Child and Adolescent Well-Care Visits</p> <p>Members 3–21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.</p>	<p>Age 3-21: One or more well-care visits during the measurement year. The well-care visit must occur with a PCP or an OB/GYN practitioner, but the practitioner does not have to be the practitioner assigned to the member.</p>	<p>CPT Code(s): 99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395, 99461</p> <p>ICD-10-CM Code(s): Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z00.3, Z02.5, Z76.1, Z76.2</p>
<p>W30 Well-Child Visits in the First 30 Months of Life</p> <p>Members who had the following number of well-child visits with a PCP during the last 15 months.</p>	<p>Age 0 - 30 Months Two Rates Reported:</p> <ul style="list-style-type: none"> • Well-Child Visits in the First 15 Months. Six or more well-child visits for children who turned 15 months old during the measurement year. • Well-Child Visits for Age 15 Months–30 Months. Two or more well-child visits for children who turned 30 months old during the measurement year. 	<p>CPT Code(s): 99381, 99382, 99391, 99392, 99461</p> <p>ICD-10-CM Code(s): Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z00.3, Z02.5, Z76.1, Z76.2</p>