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HEDIS Measure	HEDIS Criteria/Documentation	Coding System	Methodology
HEDIS Measure ADD – Follow-up Care for Children Prescribed With Attention-Deficit/ Hyperactivity Disorder	HEDIS Criteria/Documentation The percentage of children newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was	Coding System Codes to Identify Follow-up Visits: CPT: 90791, 90792, 90804-90815, 90832-90840, 96150-96154, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99383, 99384, 99393, 99394, 99401-99404, 99411, 99412, 99510 HCPCS: G0155, G0176, G0177, G0409-G0411, H0002, H0004, H0031,	Methodology Claims/Encounter
Medication	 dispensed. Two rates are reported: 1. Initiation Phase: The percentage of members 6 to 12 years old as of the index prescription start date (IPSD) with an ambulatory prescription dispensed for ADHD medication who had one follow-up visit with a practitioner with prescribing authority during the 30-day initiation phase. 2. Continuation and Maintenance (C&M) Phase: The percentage of members 6 to 12 years old as of the IPSD with an ambulatory prescription dispensed for ADHD medication, who remained on the medication for at least 210 days and who, in addition to the visit in the initiation phase, had at least two follow-up visits with a practitioner within 270 days (nine months) after the initiation phase ended. 	H0034-H0037, H0039, H0040, H2000, H2001, H2010-H2020, M0064, S0201, S9480, S9484, S9485 UB Revenue: 0510, 0513, 0515-0517, 0519-0523, 0526-0529, 0900, 0902-0905, 0907, 0911-0917, 0919, 0982, 0983 CPT Codes to Identify Follow-up Visits With Place of Service (POS): CPT: 90801, 90802, 90816-90819, 90821-90824, 90826-90829, 90845, 90847, 90849, 90853, 90857, 90862, 90875, 90876 with POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 20, 22, 33, 49, 50, 52, 53, 71, 72 CPT Codes to Identify Follow-up Visits With Place of Service (POS): CPT: 99221-99223, 99231-99233, 99238, 99239, 99251-99255 with POS: 52, 53 CPT Codes to Identify Telephone Visits: 98966-98968, 99441-99443 Code to Identify Exclusions: Narcolepsy: ICD-9-CM Diagnosis Code: 347	

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ADV – Annual	The percentage of members 2 to 21 years of	Codes to Identify Annual Dental Visits:	Claims/Encounter
Dental Visit	age who had at least one dental visit during	CPT : 70300, 70310, 70320, 70350, 70355	
	the measurement year. This measure applies	HCPCS/CDT: D0120-D0999, D1110-D2999, D3110-D3999, D4210-D4999,	
	only if dental care is a covered benefit in the	D5110-D5899, D6010-D6205, D7111-D7999, D8010-D8999, D9110-D9999	
	organization's Medicaid contract.		
ASM – Use of	The percentage of members 5 to 64 years old	ICD-9-CM Diagnosis Codes to Identify Asthma: 493.0, 493.1, 493.8, 493.9	Claims/Encounter
Appropriate	during the measurement year who were		
Medications for	identified as having persistent asthma and	Codes to Identify Outpatient Visits:	
People With Asthma	who were appropriately prescribed	CPT : 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-	
	medication during the measurement year.	99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411,	
		99412, 99420, 99429, 99455, 99456	
		HCPCS: G0402, G0438, G0439	
		UB Revenue : 051x, 0520-0523, 0526-0529, 0982, 0983	
		Codes to Identify Acute Inpatient:	
		CPT : 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291	
		UB Revenue : 010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139,	
		0140-0144, 0149, 0150-0154, 0159, 016x, 020x, 021x, 072x, 0987	
		Codes to Identify ED Visits:	
		CPT : 99281-99285	
		UB Revenue : 045x, 0981	
		ICD-9-CM Diagnosis Codes to Identify Required Exclusions:	
		Emphysema: 492, 518.1, 518.2	
		COPD : 491.2, 493.2, 496, 506.4	
		Cystic Fibrosis: 277.0	

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		Acute Respiratory Failure: 518.81	
AWC – Adolescent	The percentage of enrolled members 12 to 21	Codes to Identify Adolescent Well-Child Visits:	Claims/Encounter
Well-Care Visits	years old who had at least one	CPT : 99381-99385, 99391-99395, 99461	and/or Medical Record
	comprehensive well-care visit with a primary	HCPCS: G0438, G0439	Review
	care physician (PCP) or an OB/GYN	ICD-9-CM Diagnosis: V20.2, V20.3, V20.31, V20.32, V70.0, V70.3, V70.5,	
	practitioner during the measurement year.	V70.6, V70.8, V70.9	
CAP – Children and	The percentage of members 12 months to 19	Codes to Identify Ambulatory or Preventive Care Visits:	Claims/Encounter
Adolescents' Access	years old who had a visit with a PCP. The	Office or Other Outpatient Services:	
to Primary Care	organization reports four separate	CPT : 99201-99205, 99211-99215, 99241-99245, 99386, 99387, 99396,	
Physicians (PCPs)	percentages for each product line:	99397	
		HCPCS: G0402	
	• Children 12 to 24 months and 25 months to 6 years old who had a visit with a PCP	UB Revenue : 051x, 0520-0523, 0526-0529, 0982, 0983	
	during the measurement year	Home Services:	
	• Children 7 to 11 years old and adolescents 12 to 19 years old who had a visit with a	CPT : 99341-99345, 99347-99350	
	PCP during the measurement year or the	Preventive Medicine:	
	year prior to the measurement year	CPT : 99381-99385, 99391-99395, 99401-99404, 99411-99412, 99420,	
	, ,	99429	
		HCPCS : G0438, G0439	
		General Medical Examination:	
		ICD-9-CM Diagnosis: V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	

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CIS – Childhood	The percentage of children 2 years old who	Codes to Identify Immunizations:	Claims/Encounter
Immunization Status	had the following vaccines by their second	Diphtheria, Tetanus and Pertussis (DTaP):	and/or Medical Record
	birthday:	CPT : 90698, 90700, 90721, 90723	Review
		ICD-9-CM Procedure*: 99.39	
	Four diphtheria, tetanus and acellular		
	pertussis (DTaP)	Inactivated Poliovirus Vaccine (IPV):	
	Three polio (IPV)	CPT : 90698, 90713, 90723	
	One measles, mumps and rubella (MMR)		
	Three H influenza type B (HiB)	Measles, Mumps and Rubella (MMR):	
	Three hepatitis B (HepB)	CPT : 90707, 90710	
	One chickenpox (VZV)	Measles and Rubella:	
	Four pneumococcal conjugate (PCV)	CPT : 90708	
	Two hepatitis A (HepA)		
	Two or three rotavirus (RV)	Measles:	
	Two influenza (flu)	CPT : 90705	
	1 Wo mindenza (ma)	ICD-9-CM Diagnosis*: 055	
	The measure calculates a rate for each		
	vaccine and nine separate combination rates.	Mumps:	
	Table and this separate commencer rates	CPT : 90704	
		ICD-9-CM Diagnosis*: 072	
		Rubella:	
		CPT : 90706	
		ICD-9-CM Diagnosis*: 056	

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Haemophilus influenzae (HiB):
CPT : 90645-90648, 90698, 90721, 90748
Hamatikia D.
Hepatitis B:
CPT: 90723, 90740, 90744, 90747, 90748
HCPCS: G0010
ICD-9-CM Diagnosis*: 070.2, 070.3, V02.61
Varicella Zoster Virus (VZV):
CPT : 90710, 90716
ICD-9-CM Diagnosis*: 052, 053
Pneumococcal Conjugate:
CPT : 90669, 90670
HCPCS: G0009
Hepatitis A:
CPT : 90633
ICD-9-CM Diagnosis*: 070.0, 070.1
Rotavirus (Two-dose Schedule):
CPT : 90681
Rotavirus (Three-dose Schedule):
CPT: 90680

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		Influenza: CPT: 90655, 90657, 90661, 90662 HCPCS: G0008 ICD-9-CM Procedure*: 99.52	
		*ICD-9-CM diagnosis codes indicate evidence of disease.	
CWP – Appropriate Testing for Children With Pharyngitis	The percentage of children 2 to 18 years old, who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode. A higher rate represents better performance (i.e., appropriate testing).	Codes to Identify Outpatient Visits: CPT: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341- 99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455 UB Revenue: 051x, 0520-0523, 0526-0529, 0982, 0983	Claims/Encounter
	(nei) appropriate testing).	Codes to Identify Emergency Department (ED) Visit*: CPT: 99281-99285 UB Revenue: 045x, 0981	
		*Do not include ED visit that results in an inpatient admission.	
		ICD-9-CM Diagnosis Codes to Identify Pharyngitis: Acute Pharyngitis: 462 Acute Tonsillitis: 463 Streptococcal Sore Throat: 034.0	
		CPT Codes to Identify Group A Streptococcus Tests: 87070, 87071, 87081, 87430, 87650-87652, 87880	

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FUH – Follow-up
After Hospitalization
for Mental Illness

The percentage of discharges for members 6 years old and older who were hospitalized for treatment of selected mental health disorders and who had an outpatient visit, an intensive outpatient encounter or partial hospitalization with a mental health practitioner.

Two rates are reported:

- **1.** The percentage of members who received follow-up within 30 days of discharge
- **2.** The percentage of members who received follow-up within seven days of discharge

ICD-9-CM Diagnosis Codes to Identify Mental Health Diagnosis: 295-299, 300.3, 300.4, 301, 308, 309, 311-314

Claims/Encounter

Codes to Identify Visits:

CPT**: 90791, 90792, 90804-90815, 90832-90840, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99383-99387, 99393-99397, 99401-99404, 99411, 99412, 99510

HCPCS**: G0155, G0176, G0177, G0409-G0411, H0002, H0004, H0031, H0034-H0037, H0039, H0040, H2000, H2001, H2010-H2020, M0064, S0201, S9480, S9484, S9485

CPT With Place of Service (POS) Codes**:

CPT: 90801, 90802, 90816-90819, 90821-90824, 90826-90829, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90875, 90876 *with* **POS**: 03, 05, 07, 09, 11, 12, 13, 14, 15, 20, 22, 24, 33, 49, 50, 52, 53, 71, 72 **CPT With POS Codes****:

CPT: 99221-99223, 99231-99233, 99238, 99239, 99251-99255 *With* **POS**: 52, 53

UB Revenue (do not need to identify practitioner type):

0513, 0900-0905, 0907, 0911-0917, 0919

UB Revenue**: 0510, 0515-0517, 0519-0523, 0526-0529, 0982, 0983

**Follow-up visits identified by these CPT codes must be with a mental health practitioner.

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IMA –	The percentage of adolescents 13 years old	Codes to Identify Adolescent Immunizations:	Claims/Encounter
Immunizations for	who had one dose of meningococcal vaccine	Meningococcal:	and/or Medical Record
Adolescents	and one tetanus, diphtheria toxoids and	CPT : 90733, 90734	Review
	acellular pertussis vaccine (Tdap) or one		
	tetanus, diphtheria toxoids vaccine (Td) by	Tdap:	
	their 13th birthday.	CPT : 90715	
	This measure calculates a rate for each	Tetanus and Diphtheria (Td):	
	vaccine and one combination rate.	CPT: 90714, 90718	
		Tetanus:	
		CPT : 90703	
		Diphtheria:	
		CPT: 90719	
		Exclusion:	
		Anaphylactic reaction to the vaccine or its components:	
		ICD-9-CM Diagnosis: 999.4	
HPV – Human	The percentage of female adolescents 13	Codes to Identify HPV Immunization for Female Adolescents:	
Papillomavirus for	years of age who had three doses of the	CPT : 90649, 90650	
Female Adolescents	human papillomavirus (HPV) vaccine by their		
	13th birthday.	Exclusion:	
		Anaphylactic reaction to the vaccine or its components:	
		ICD-9-CM Diagnosis: 999.4	

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	The percentage of children 2 years old who	CPT Code to Identify Lead Tests: 83655	Claims/Encounter
Screening in	had one or more capillary or venous lead		and/or Medical Record
Children	blood tests for lead poisoning by their second		Review
	birthday.		
MMA – Medication	The percentage of members 5 to 64 years old	ICD-9 Diagnosis Codes to Identify Asthma: 492.1, 493.0, 493.8, 493.9	Claims/Encounter
Management for	who during the measurement year were		
People With Asthma	identified as having persistent asthma and	Codes to Identify Visit Type:	
	were dispensed appropriate medications that	Outpatient:	
	they remained on during the treatment	CPT: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-	
	period.	99345, 99347-99350, 99382-99386, 99392-99396, 99401-99404, 99411,	
		99412, 99420, 99429	
		UB Revenue : 051x, 0520-0523, 0526-0529, 057x-059x, 0982, 0983	
	Two rates are reported:		
	1. The percentage of members who	Acute Inpatient:	
	remained on an asthma controller	CPT: 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291	
	medication for at least 50 percent of	UB Revenue : 010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139,	
	their treatment period	0140-0144, 0149, 0150-0154, 0159, 016x, 020x, 021x, 072x, 0987	
	2. The percentage of members who		
	remained on an asthma controller	Emergency Department:	
	medication for at least 75 percent of	CPT: 99281-99285	
	their treatment period	UB Revenue : 045x, 0981	
	·	,	
		ICD-9 Diagnosis Codes to Identify Required Exclusions:	
		Emphysema: 492, 506.4, 518.1, 518.2	
		COPD: 491.2, 493.2, 496, 506.4	
		Cystic Fibrosis: 277.0	
		Acute Respiratory Failure: 518.81	

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URI – Appropriate	The percentage of children 3 months to 18	Codes to Identify Outpatient Visits:	Claims/Encounter
Treatment for	years old who were given a diagnosis of	CPT: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-	
Children With Upper	upper respiratory infection (URI) and were	99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411,	
Respiratory	not dispensed an antibiotic prescription. A	99412, 99420, 99429, 99455, 99456	
Infections	higher rate indicates appropriate treatment		
	of children with URI.	HCPCS : G0402, G0438, G0439	
		UB Revenue : 051x, 0520-0523, 0526-0529, 0982, 0983	
		Codes to Identify ED Visit*:	
		CPT : 99281-99285	
		UB Revenue : 045x, 0981	
		*Do not include ED visits that result in an inpatient admission.	
		ICD-9-CM Diagnosis Codes to Identify Upper Respiratory Infection:	
		Acute Nasopharyngitis (Common Cold): 460	
		URI: 465	
W15 – Well-Child	The percentage of members who turned 15	Codes to Identify Well-Child Visits:	Claims/Encounter
Visits in the First 15	months old during the measurement year	CPT : 99381-99385, 99391-99395, 99461	and/or Medical Record
Months of Life	and who had the following number of well-	HCPCS: G0438-G0439	Review
	child visits with a PCP during their first 15	ICD-9-CM Diagnosis: V20.2, V20.3, V70.0, V70.3, V70.5, V70.6, V70.8,	
	months of life:	V70.9	
	No well-child visits		
	One well-child visit		
	Two well-child visits		
	Three well-child visits		
	Four well-child visits		

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	Five well-child visits Six or more well-child visits		
W34 – Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life	The percentage of members 3 to 6 years old who received one or more well-child visits with a PCP during the measurement year.	Codes to Identify Well-Child Visits: CPT: 99381-99385, 99391-99395, 99461 HCPCS: G0438, G0439 ICD-9-CM Diagnosis: V20.2, V20.3, V20.31, V20.32, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	Claims/Encounter and/or Medical Record Review
WCC – Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	The percentage of members 3 to 17 years old who had an outpatient visit with a PCP or OB/GYN and who had evidence of body mass index (BMI) percentile documentation, and received educational materials on nutrition and physical activity during a face-to-face visit. The height and weight must be taken during the measurement year.	Identify Outpatient Visits: CPT Codes: 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456 HCPCS: G0402, G0438, G0439 UB Revenue: 051x, 0520-0523, 0526-0529, 0982, 0983 Codes to Identify BMI Percentage, Counseling for Nutrition and Counseling for Physical Activity:	Claims/Encounter and/or Medical Record Review
	The weight and BMI must be from the same data source.	MI Percentile: ICD-9-CM Diagnosis: V85.5 Counseling for Nutrition: CPT: 97802-97804 ICD-9-CM Diagnosis: V65.3 HCPCS: G0270, G0271, G0447, S9449, S9452, S9470	

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[‡] HEDIS[®] codes can change from year to year. The codes in this document are for 2014 (measurement year 2013).

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ICD-9-CM is the International Classification of Diseases, Ninth Revision, Clinical Modification developed by the World Health Organization.

HCPCS is the Healthcare Common Procedure Coding System used by the Centers for Medicare & Medicaid Services.

UB codes, maintained by the National Uniform Billing Committee, are used by institutions like hospitals in billing multiple third-party payers.

CDT codes are the Code on Dental Procedures and Nomenclature codes maintained by the American Dental Association (ADA).

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	Counseling for Physical Activity:	
	ICD-9-CM Diagnosis: V65.41	
	HCPCS : G0447, S9451	
1		
	ICD-9-CM Diagnosis Codes to Identify Exclusions:	
	Pregnancy: 630-679, V22, V23, V28	

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