

HEDIS® 2014 (MEASUREMENT YEAR 2013) ADULT MEASURES AND CODES GUIDE ‡

HEDIS Measure	HEDIS Criteria/Documentation	Coding System	Methodology
AAB – Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis	The percentage of adults 18 to 64 years old with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription. A higher rate indicates appropriate treatment.	<p><u>Codes to Identify Outpatient Visits:</u> CPT: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456 UB Revenue: 051x, 0520-0523, 0526-0529, 0982, 0983</p> <p>HCPCS: G0402, G0438, G0439</p> <p><u>Codes to Identify Emergency Department (ED) Visits:</u> CPT: 99281-99285 UB Revenue: 045x, 0981</p> <p><u>ICD-9-CM Diagnosis Codes to Identify Acute Bronchitis:</u> 466.0</p>	Claims/Encounter
AAP – Adults' Access to Preventive/ Ambulatory Health Services*	The percentage of members 20 years old and older who had an ambulatory or preventive care visit.	<p><u>Codes to Identify Preventive/Ambulatory Health Services:</u></p> <p>Office or Other Outpatient Services: CPT: 99201-99205, 99211-99215, 99241-99245, 99381-99384, 99391-99394 UB Revenue: 051x, 0520-0523, 0526-0529, 0982, 0983</p> <p>Home Services: CPT: 99341-99345, 99347-99350</p>	Claims/Encounter

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		<p>Nursing Facility Care: CPT: 99304-99310, 99315, 99316, 99318 UB Revenue: 0524, 0525</p> <p>Ancillary, Rest Home or Custodial Care Services: CPT: 99324-99328, 99334-99337</p> <p>Preventive Medicine: CPT: 99385-99387, 99395-99397, 99401-99404, 99411, 99412, 99420, 99429 HCPCS: G0402, G0438, G0439</p> <p>Ophthalmology and Optometry: CPT: 92002, 92004, 92012, 92014 HCPCS: S0620, S0621</p> <p>General Medical Examination: ICD-9-CM Diagnosis: V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9</p>	
ABA – Adult Body Mass Index (BMI) Assessment	The percentage of members 18 to 74 years old who had an outpatient visit and who had BMI documented during the measurement year or the year prior to the measurement year.	<p><u>Codes to Identify Outpatient Visits:</u> CPT: 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</p> <p><u>UB Revenue:</u> 051x, 0520-0523, 0526-0529, 0982, 0983</p>	Claims/Encounter and/or Medical Review

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		ICD-9-CM Diagnosis Codes to Identify BMI: V85.0 <u>Pregnancy Exclusion:</u> ICD-9-CM Diagnosis Codes: 630-679, V22, V23, V28	
AMM – Antidepressant Medication Management	The percentage of members 18 years old and older who were diagnosed with a new episode of major depression, were treated with antidepressant medication and remained on an antidepressant medication treatment. Two rates are reported: <ul style="list-style-type: none"> • Effective Acute Phase Treatment: The percentage of newly diagnosed and treated members who remained on an antidepressant medication for at least 84 days (12 weeks) • Effective Continuation Phase Treatment: The percentage of newly diagnosed and treated members who remained on an antidepressant medication for at least 180 days (six months) 	<u>ICD-9-CM Diagnosis Codes to Identify Major Depression:</u> 296.20-296.25, 296.30-296.35, 298.0, 311 <u>Codes to Identify Visit Type:</u> Emergency Department (ED): CPT: 99281-99285 UB Revenue: 045x, 0981 Outpatient, Intensive Outpatient, and Partial Hospitalization: CPT: 90791, 90792, 90804-90815, 90832-90840, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 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 UB Revenue: 0510, 0513, 0515-0517, 0519-0523, 0526-0529, 0900, 0901, 0902-0905, 0907, 0911-0917, 0919, 0982, 0983 CPT With Place of Service (POS) CPT: 90801, 90802, 90816-90819, 90821-90824, 90826-90829, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 With POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 20, 22, 24, 33, 49, 50, 52, 53, 71, 72	Claims/Encounter

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ART – Disease-Modifying Antirheumatic Drug Therapy for Rheumatoid Arthritis*	The percentage of members 18 years old and older who were diagnosed with rheumatoid arthritis and who were dispensed at least one ambulatory prescription for a disease-modifying antirheumatic drug (DMARD).	<p><u>Codes to Identify Rheumatoid Arthritis:</u> ICD-9-CM Diagnosis: 714.0, 714.1, 714.2, 714.81</p> <p><u>Codes to Identify Outpatient Visit Type:</u> CPT: 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456</p> <p>HCPCS: G0402, G0438, G0439</p> <p>UB Revenue: 051x, 0520-0523, 0526-0529, 0982, 0983</p> <p><u>ICD-9-CM Diagnosis Codes to Identify Exclusions:</u> HIV: 042, V08 Pregnancy: 630-679, V22, V23, V28</p>	Claims/Encounter
ASM – Use of Appropriate Medications for People With Asthma	The percentage of members 5 to 64 years old during the measurement year who were identified as having persistent asthma and who were appropriately prescribed medication during the measurement year.	<p><u>ICD-9 CM Diagnosis Codes to Identify Asthma:</u> 493.0, 493.1, 493.8, 493.9</p> <p><u>Codes to Identify Outpatient Visits:</u> CPT: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456</p> <p>HCPCS: G0402, G0438, G0439</p> <p>UB Revenue: 051x, 0520-0523, 0526-0529, 0982, 0983</p>	Claims/Encounter

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		<p><u>Codes to Identify Acute Inpatient:</u> 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</p> <p><u>Codes to Identify ED:</u> CPT: 99281-99285 UB Revenue: 045x, 0981</p> <p><u>ICD-9 Codes to Identify Required Exclusions:</u> Emphysema: 492, 518.1, 518.2 COPD: 491.2, 493.2, 496. 506.4 Cystic Fibrosis: 277.0 Acute Respiratory Failure: 518.81</p>	
BCS – Breast Cancer Screening*	The percentage of women 50 to 74 years old who had one or more mammograms during the measurement year or two years prior to the measurement year.	<p><u>Codes to Identify Breast Cancer Screening:</u> CPT: 77055-77057 HCPCS: G0202, G0204, G0206 ICD-9-CM Procedure: 87.36, 87.37 UB Revenue: 0401, 0403</p> <p><u>Codes to Identify Exclusions:</u> Bilateral Mastectomy: ICD-9-CM Procedure: 85.42, 85.44, 85.46, 85.48</p> <p>Unilateral Mastectomy*: CPT With Modifier 50 or Modifier Code 09950: 19180, 19200, 19220, 19240, 19303-19307</p>	Claims/Encounter

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		<p>CPT with two separate occurrences on two separate dates of service: 19180, 19200, 19220, 19240, 19303-19307</p> <p>ICD-9-CM Procedure Codes with two separate occurrences on two different dates of services: 85.41, 85.43, 85.45, 85.47</p> <p><i>*May use RT or LT modifiers for a unilateral mastectomy (may be on the same date of service)</i></p>	
CBP – Controlling High Blood Pressure*	The percentage of members 18 to 85 years old who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (<140/90 mmHg) during the measurement year.	<p><u>Codes to Identify Outpatient Visits:</u> CPT: 99201-99205, 99211-99215, 99241-99245, 99341-99350, 99381 - 99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456</p> <p><u>ICD-9-CM Diagnosis Codes to Identify Hypertension:</u> 401</p> <p><u>Codes to Identify Exclusions:</u> Evidence of ESRD: CPT: 36145, 36147, 36800, 36810, 36815, 36818, 36819, 36820, 36821, 36831-36833, 50300, 50320, 50340, 50360, 50365, 50370, 50380, 90919, 90920, 90921, 90923, 90924, 90925, 90935, 90937, 90940, 90945, 90947, 90957-90962, 90965, 90966, 90969, 90970, 90989, 90993, 90997, 90999, 99512 HCPCS: G0257, G0308-G0319, G0321, G0322, G0323, G0325, G0326, G0327, G0392, G0393, S2065, S9339 ICD-9-CM Diagnosis: 585.5, 585.6, V42.0, V45.1 ICD-9-CM Procedure: 38.95, 39.27, 39.42, 39.43, 39.53, 39.93-39.95, 54.98, 55.6 UB Revenue: 0367, 080x, 082x-085x, 088x POS: 65</p>	Medical Record Review

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		Pregnancy: ICD-9-CM Diagnosis Codes: 630-679, V22, V23, V28	
CCS – Cervical Cancer Screening	<p>The percentage of women 21 to 64 years old who were screened for cervical cancer using either of the following criteria:</p> <ul style="list-style-type: none"> ○ <u>Women age 21 to 64</u> who had cervical cytology performed every three years ○ <u>Women age 30 to 64</u> who had cervical cytology/human papillomavirus (HPV) co-testing performed every five years ○ <u>Women 24 to 64</u> must have cervical cytology during the measurement year (MY) or the two years prior to the MY (Jan. 1, 2011, to Dec. 31, 2013) ○ <u>Women 30 to 64</u> must have cervical cytology and HPV testing on the same date of service during the MY or the four years prior to the MY (Jan. 1, 2009, to Dec. 31, 2013) 	<p>Codes to Identify Cervical Cancer Screening: CPT: 88141-88143, 88147, 88148, 88150, 88152-88154, 88164-88167, 88174, 88175 HCPCS: G0123, G0124, G0141, G0143-G0145, G0147, G0148, P3000, P3001, Q0091 UB Revenue: 0923</p> <p>Codes to Identify Exclusions: CPT: 51925, 56308, 57540, 57545, 57550, 57555, 57556, 58150, 58152, 58200, 58210, 58240, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58285, 58290-58294, 58548, 58550-58554, 58570-57573, 58951, 58953, 58954, 58956, 59135 ICD-9-CM Diagnosis: 618.5, V67.01, V76.47, V88.01, V88.03 ICD-9-CM Procedure: 68.4-68.8</p>	Claims/Encounter and/or Medical Record Review

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<p>CDC – Comprehensive Diabetes Care*</p>	<p>The percentage of members 18 to 75 years old with diabetes (type 1 and type 2) who had each of the following:</p> <ul style="list-style-type: none"> • Hemoglobin A1c (HbA1c) testing: One or more HbA1c tests conducted during the measurement year • HbA1c control (<8.0 percent): The most recent HbA1c level (performed during the measurement year) is <8.0 percent • HbA1c poor control (>9.0 percent): The most recent HbA1c level (performed during the measurement year) is >9.0 percent (lower rate indicates a better performance) • Eye exam (retinal) performed: An eye screening for diabetic retinal disease in the measurement year by an eye care professional or a negative retinal exam performed by an eye care professional in the year before the measurement year • LDL-C screening: LDL-C screening performed during the measurement year • LDL-C control (<100mg/dL): The most recent LDL-C level performed during the measurement year is <100 mg/dL • Medical attention for nephropathy with a nephropathy screening test (urine microalbumin test) during measurement 	<p>ICD-9-CM Diagnosis Codes to Identify Diabetes: 250, 357.2, 362.0, 366.41, 648.0</p> <p>Codes to Identify Visit Type: Outpatient: CPT: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456</p> <p>HCPCS: G0402, G0438, G0439</p> <p>UB Revenue: 051x, 0520-0523, 0526-0529, 0982, 0983</p> <p>Nonacute Inpatient: CPT: 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337 UB Revenue: 0118, 0128, 0138, 0148, 0158, 019x, 0524, 0525, 055x, 066x</p> <p>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</p> <p>Emergency Department: CPT: 99281-99285 UB Revenue: 045x, 0981</p> <p>Codes to Identify HbA1c Tests: CPT: 83036, 83037 CPT Cat. II: 3044F, 3045F, 3046F CPT Cat. II Codes to Identify (HbA1c Levels >9.0 percent): 3046F</p>	<p>Claims/Encounter and/or Medical Record Review</p>
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	<p>year or evidence of nephropathy during the measurement year as per the claim/encounter for treatment of nephropathy, nephrologist visit, positive urine macroalbumin test, or ACE inhibitor/ARB therapy during the measurement year</p> <ul style="list-style-type: none"> • The BP reading from the last visit in the reporting year is adequately controlled (<140/90 mmHg and well controlled (<140/80 mmHg) 	<p>CPT Cat. II Codes to Identify (HbA1c Levels ≤9.0 percent): 3044F, 3045F CPT Cat. II Codes to Identify (HbA1c Levels <8.0 percent): 3044F CPT Cat. II Codes to Identify (HbA1c Levels ≥8.0 percent): 3045F, 3046F</p> <p><u>Codes to Identify Eye Exams:</u> CPT: 67028, 67030, 67031, 67036, 67039-67043, 67101, 67105, 67107, 67108, 67110, 67112, 67113, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228, 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92225-92228, 92230, 92235, 92240, 92250, 92260, 99203-99205, 99213-99215, 99242-99245 CPT Cat. II**: 2022F, 2024F, 2026F, 3072F*** HCPCS: S0620, S0621, S0625**, S3000</p> <p><i>** The organization does not need to limit CPT Category II codes or HCPCS S0625 to an optometrist or an ophthalmologist. These codes indicate an eye exam was performed by an eye care professional.</i></p> <p><i>*** CPT Category II code 3072F can only be used if the claim/encounter was during the measurement year because it indicates the member had “no evidence of retinopathy” in the prior year.</i></p> <p><u>Codes to Identify LDL-C Screening:</u> CPT: 80061, 83700, 83701, 83704, 83721 CPT Cat. II: 3048F, 3049F, 3050F CPT Cat. II Codes to Identify (LDL-C <100 mg/dL): 3048F CPT Cat. II Codes to Identify (LDL-C >100 mg/dL): 3049F, 3050F</p>	
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		<p><u>Codes to Identify Nephropathy Screening Tests:</u> CPT: 82042, 82043, 82044, 84156 CPT Cat. II: 3060F, 3061F</p> <p><u>Codes to Identify Evidence of Nephropathy:</u> Urine Macroalbumin Test: CPT: 81000-81003, 81005 CPT Cat. II: 3062F</p> <p><u>Codes to Identify Evidence of Treatment for Nephropathy:</u> CPT: 36147, 36800, 36810, 36815, 36818, 36819-36821, 36831-36833, 50300, 50320, 50340, 50360, 50365, 50370, 50380, 90935, 90937, 90940, 90945, 90947, 90957-90962, 90965, 90966, 90969, 90970, 90989, 90993, 90997, 90999, 99512 CPT Cat. II: 3066F HCPSC: G0257, S9339, S2065 ICD-9-CM Diagnosis: 250.4, 403, 404, 405.01, 405.11, 405.91, 580-588, 753.0, 753.1, 791.0, V42.0, V45.1 ICD-9-CM Procedure: 38.95, 39.27, 39.42, 39.43, 39.53, 39.93-39.95, 54.98, 55.6 UB Revenue: 0367. 080x, 082x-085x, 088x POS: 65</p> <p><u>Codes to Identify Evidence of ACE Inhibitor/ARB Therapy:</u> CPT Cat. II: 4010F</p> <p><u>CPT Cat. II Codes to Identify Systolic & Diastolic BP Levels <140/80 mmHg:</u> Compliant-BP <140/80 mmHg</p>	
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		<p>Systolic: 3074F, 3075F Diastolic: 3078F Noncompliant-BP $\geq 140/80$ mm Hg Systolic: 3077F Diastolic: 3079F, 3080F</p> <p><u>CPT Cat. II Codes to Identify Systolic & Diastolic BP Levels</u> <140/90 mm Hg: Compliant-BP $<140/90$ mm Hg Systolic: 3074F, 3075F Diastolic: 3078F, 3079F Noncompliant-BP $\geq 140/90$ mm Hg Systolic: 3077F Diastolic: 3080F</p> <p><u>Codes to Identify Exclusion:</u> Polycystic Ovaries: 256.4 Steroid Induced: 249, 251.8, 962.0 Gestational Diabetes: 648.8</p>	
CHL – Chlamydia Screening in Women	The percentage of women 16 to 24 years old who were identified as sexually active and who had at least one test for chlamydia during the measurement year.	<p><u>Codes to Identify Sexually Active Women:</u> CPT: 57022, 57170, 58300, 58301, 58600, 58605, 58611, 58615, 58970, 58974, 58976, 59000, 59001, 59012, 59015, 59020, 59025, 59030, 59050, 59051, 59070, 59072, 59074, 59076, 59100, 59120, 59121, 59130, 59135, 59136, 59140, 59150, 59151, 59160, 59200, 59300, 59320, 59325, 59350, 59400, 59409, 59410, 59412, 59414, 59425, 59426, 59430, 59510, 59514, 59515, 59525, 59610, 59612, 59614, 59618, 59620, 59622, 59812, 59820, 59821, 59830, 59840, 59841, 59850-59852, 59855-59857, 59866, 59870, 59871, 59897, 59898, 59899, 76801, 76805, 76811, 76813, 76815-76821, 76825-76828, 76941, 76945-76946, 80055, 81025, 82105, 82106, 82143, 82731, 83632, 83661-83664, 84163, 84702-84704, 86592, 86593, 86631-86632, 87110, 87164, 87166, 87270, 87320, 87490-87492, 87590-87592,</p>	Claims/Encounter

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		<p>87620-87622, 87660, 87808, 87810, 87850, 88141-88143, 88147, 88148, 88150, 88152-88155, 88164-88167, 88174-88175, 88235, 88267, 88269</p> <p>LOINC: 72732-0, 73752-8, 73959-9</p> <p>HCPCS: G0101, G0123, G0124, G0141, G0143-G0145, G0147, G0148, G0450, H1000, H1001, H1003-H1005, P3000, P3001, Q0091, S0199, S4981, S8055</p> <p>ICD-9-CM Diagnosis: 042, 054.10, 054.11, 054.12, 054.19, 078.11, 078.88, 079.4, 079.51-079.53, 079.88, 079.98, 091-097, 098.0, 098.10, 098.11, 098.15-098.19, 098.2, 098.30, 098.31, 098.35-098.8, 099, 131, 302.76, 339.82, 614, 615, 622.3, 623.4, 625.0, 626.7, 628, 630-679, 795.0, 795.1, 796.7, 996.32, V01.6, V02.7, V02.8, V08, V15.7, V22-V25, V26.0-V26.4, V26.51, V26.8, V26.9, V27, V28, V45.5, V61.5-V61.7, V69.2, V72.3, V72.4, V73.81, V73.88, V73.98, V74.5, V76.2</p> <p>ICD-9-CM Procedure: 69.01, 69.02, 69.51, 69.52, 69.7, 72-75, 88.78, 97.24, 97.71, 97.73</p> <p>UB Revenue: 0112, 0122, 0132, 0142, 0152, 0720-0722, 0724, 0729, 0923, 0925</p> <p>CPT Codes to Identify Chlamydia Screening: 87110, 87270, 87320, 87490-87492, 87810</p>	
<p>CMC – Cholesterol Management for Patients With Cardiovascular Conditions*</p>	<ul style="list-style-type: none"> The percentage of members 18 to 75 years old who were discharged for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous coronary interventions (PCI) in the year prior to the MY – Jan. 1 to Dec. 31, 2012, <u>or</u> who had a diagnosis of IVD during the MY and the year prior to the 	<p>Codes to Identify AMI, PCI, CABG, and IVD:</p> <p>AMI (include only inpatient claims):</p> <p>ICD-9-CM Diagnosis: 410.x1</p> <p>CABG (include only inpatient claims):</p> <p>CPT: 33510-33514, 33516-33519, 33521-33523, 33533-33536</p> <p>HCPCS: S2205-S2209</p> <p>ICD-9-CM Procedure: 36.1, 36.2</p>	<p>Claims/Encounter and/or Medical Record Review</p>

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	<p>MY – Jan. 1, 2012 to Dec. 31, 2013</p> <ul style="list-style-type: none">• LDL-C screening• LDL-C control (<100 mg/dL)	<p>PCI: CPT: 92920, 92924, 92928, 92933, 92937, 92941, 92943, 92980, 92982, 92995 HCPCS: G0290 ICD-9-CM Procedure: 00.66, 36.06, 36.07</p> <p>IVD: ICD-9-CM Diagnosis: 411, 413, 414.0, 414.2, 414.8, 414.9, 429.2, 433-434, 440.1, 440.2, 440.4, 444, 445</p> <p>Codes to Identify Visit Type: Outpatient: CPT: 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456</p> <p>HCPCS: G0402, G0438, G0439</p> <p>UB Revenue: 051x, 0520-0523, 0526-0529, 0982, 0983</p> <p>Acute Inpatient: CPT: 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291 UB Revenue: 010x, 0100-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 016x, 020x, 021x, 072x, 0987</p> <p>Codes to Identify LDL-C Screening: CPT: 80061, 83700, 83701, 83704, 83721 CPT Cat. II: 3048F, 3049F, 3050F</p>	
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COA – Care for Older Adults	<p>The percentage of adults 66 years old and older who had each of the following during the measurement year:</p> <ul style="list-style-type: none"> • Advance care planning • Medication review • Functional status assessment • Pain assessment <p><u>Advance Care Planning</u> Advanced care planning is a discussion about preferences for resuscitation, life sustaining treatment and end-of-life care. Evidence of advance care planning must include:</p> <ul style="list-style-type: none"> • The presence of an advanced care plan in the medical record or • Documentation of an advance care planning discussion with the provider and the date on which it was discussed. The documentation of discussion must be noted in the measurement year or • Notation that the member has previously executed an advance care plan that meets criteria <p>Examples of Advance Care Plans Include: Advance directives, living will, power of attorney, health care proxy, actionable</p>	<p><u>Codes to Identify Advanced Care Planning:</u> CPT Cat. II: 1157F, 1158F HCPCS: S0257</p>	<p>Claims/Encounter and/or Medical Record Review</p>
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	<p>medical decision maker or surrogate decision maker</p> <p>Advance Care Plan Discussion: Notation in the medical record of a discussion with a provider or the initiation of a discussion by the provider during the measurement year or</p> <p>Oral statements documented in the record during the measurement year</p> <p><u>Medication Review</u> At least one medication review conducted by a prescribing practitioner or clinical pharmacist during the measurement year and the presence of a medication list in the medical record</p> <p>Documentation must come from the same medical record and must include the following:</p> <ul style="list-style-type: none"> • A medication list in the medical record, and evidence of a medication review by a prescribing practitioner or clinical pharmacist and the date on which it was performed • Notation that the member is not taking 	<p><u>Codes to Identify Medication Review</u> CPT: 90862, 90863, 99605, 99606 CPT Cat. II: 1160F</p> <p><u>Codes to Identify Medication List:</u></p> <p>HCPCS: G8427</p> <p>CPT Cat. II: 1159F</p>	
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	<p>any medication and the date on which it was noted. A review of side effects for a single medication at the time of prescription alone is not sufficient</p> <p><u>Functional Status Assessment</u> At least one functional status assessment during the measurement year and documentation in the medical record must include evidence of a complete functional status assessment and the date on which it was performed.</p> <p>Notations for a complete functional status assessment may include the following:</p> <ul style="list-style-type: none"> • Notation that instrumental activities of daily living (IADL) were assessed (at a minimum, the assessment must include shopping for groceries, driving, using public transportation, using the telephone, meal preparation, housework, home repair, laundry, taking medications, handling finances) or • Notation that activities of daily living (ADL) were assessed (at a minimum, the assessment must include bathing, dressing, eating, transferring [i.e., getting 	<p><u>Codes to Identify Functional Status Assessment:</u> CPT Cat. II: 1170F</p>	
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	<p>in and out of chairs], using toilet, walking) or</p> <ul style="list-style-type: none"> • Result of assessment using a standardized functional status assessment tool or • Notation that three of the following four components were assessed: <ul style="list-style-type: none"> – Cognitive status – Ambulation status – Sensory ability (hearing, vision, speech) – Other functional independence, i.e., exercise, ability to perform job • Notation that three of the four following components were assessed: <ul style="list-style-type: none"> – Other functional independence, i.e., exercise, ability to perform job – Cognitive status – Sensory ability (hearing, vision, speech) – Ambulation status <p>A functional status assessment limited to an acute or single condition, event or body system, i.e., lower back, leg, does not meet criteria for a comprehensive functional status assessment.</p>		
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	<u>Pain Assessment</u> <ul style="list-style-type: none"> At least one pain assessment or a pain management plan during the measurement year. Notation of a comprehensive pain assessment; pain assessment due to a single condition, event or body system does not meet criteria Results of a screening using a standardized pain screening tool 	<u>Codes to Identify Pain Screening:</u> CPT Cat. II: 1125F, 1126F	
COL – Colorectal Cancer Screening*	<p>The percentage of adults 50 to 75 years old who had an appropriate screening for colorectal cancer. Documentation of the appropriate screening must include one of the following:</p> <ul style="list-style-type: none"> Fecal occult blood test (FOBT), either guaiac or immunochemical, during the measurement year Flexible sigmoidoscopy during the measurement year or the four years before the measurement year Colonoscopy during the measurement year or the nine years before the measurement year 	<u>Codes to Identify Colorectal Cancer Screening:</u> FOBT: CPT: 82270, 82274 HCPCS: G0328 <u>Flexible Sigmoidoscopy:</u> CPT: 45330-45335, 45337-45342, 45345 HCPCS: G0104 ICD-9-CM Procedure: 45.24 <u>Colonoscopy:</u> CPT: 44388-44394, 44397, 45355, 45378-45387, 45391, 45392 HCPCS: G0105, G0121 ICD-9-CM Procedure: 45.22, 45.23, 45.25, 45.42, 45.43	Claims/Encounter and/or Medical Record Review

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		<u>Codes to Identify Exclusions:</u> <i>Colorectal Cancer:</i> HCPCS: G0213-G0215, G0231 ICD-9-CM Diagnosis: 153, 154.0, 154.1, 197.5, V10.05 <i>Total Colectomy:</i> CPT: 44150-44153, 44155-44158, 44210-44212 ICD-9-CM Procedure: 45.8	
DAE – Use of High Risk Medications in the Elderly	Two rates are reported: <ul style="list-style-type: none"> The percentage of Medicare members 66 years old and older who received at least one high risk medication The percentage of Medicare members 65 years old and older who received at least two different high risk medications For both rates, a lower rate represents better performance. <ul style="list-style-type: none"> NCQA will not publicly report this measure for HEDIS 2013 	Please see http://www.ncqa.org for a comprehensive list of medications and National Drug Code (NDC) codes.	Claims/Encounter
DDE – Potentially Harmful Drug-Disease Interactions in the Elderly	The percentage of Medicare members 65 years old and older who have evidence of an underlying disease, condition or health concern and were dispensed an ambulatory prescription for a contraindicated medication, concurrent with or after the diagnosis	Please see http://www.ncqa.org for a comprehensive list of medications and National Drug Code (NDC) codes.	Claims/Encounter

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	<ul style="list-style-type: none"> • A history of falls and a prescription for tricyclic antidepressants, antipsychotics or sleep agents • Dementia and a prescription for tricyclic antidepressants or anticholinergic agents • Chronic renal failure (CRF) and a prescription for nonaspirin, nonsteroidal anti-inflammatory drugs (NSAIDs) or Cox Selective NSAIDs <p>For all three rates, a lower rate represents better performance.</p>		
FUH – Follow-up After Hospitalization for Mental Illness	<p>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</p> <p>Two rates are reported:</p> <ol style="list-style-type: none"> 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 	<p>ICD-9-CM Diagnosis Codes to Identify Mental Health Diagnosis: 295-299, 300.3, 300.4, 301, 308, 309, 311-314</p> <p>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</p> <p>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</p>	Claims/Encounter

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		<p><u>CPT With POS Codes**:</u> CPT: 99221-99223, 99231-99233, 99238, 99239, 99251-99255 With POS: 52, 53</p> <p>UB Revenue (do not need to identify practitioner type): 0513, 0900-0905, 0907, 0911-0917, 0919</p> <p>UB Revenue **: 0510, 0515-0517, 0519-0523, 0526-0529, 0982, 0983</p> <p><i>**Follow-up visits identified by the above CPT codes must be with a mental health practitioner.</i></p>	
GSO – Glaucoma Screening in Older Adults*	The percentage of Medicare members 65 years old and older, without a prior diagnosis of glaucoma or glaucoma suspect, who received a glaucoma eye exam by an eye care professional for early identification of glaucomatous conditions.	<p><u>CPT Codes to Identify Glaucoma Screening Eye Exams:</u> CPT: 92002, 92004, 92012, 92014, 92081-92083, 92100, 92120, 92130, 92140, 99202-99205, 99213-99215, 99242-99245</p> <p>HCPCS: G0117, G0118, S0620, S0621</p> <p><u>ICD-9-CM Diagnosis Codes to Identify Exclusions:</u> Glaucoma Suspect: 365.0 Glaucoma: 365.1-365.9, 377.14</p>	Claims/Encounter
LBP – Low Back Pain	The percentage of members 18 to 50 years old with a primary diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI and CT scan) within 28 days of the diagnosis.	<p><u>ICD-9-CM Diagnosis Codes to Identify Low Back Pain:</u> 721.3, 722.10, 722.32, 722.52, 722.93, 724.02, 724.03, 724.2, 724.3, 724.5, 724.6, 724.7, 738.5, 739.3, 739.4, 846, 847.2</p>	Claims/Encounter

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		<p><u>Codes to Identify Outpatient Visits:</u></p> <p><i>Outpatient:</i> CPT: 98925-98929, 98940-98942, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456</p> <p>HCPCS: G0402, G0438, G0439 UB Revenue: 051x, 0520-0523, 0526-0529, 0982, 0983</p> <p><i>Emergency Department:</i> CPT: 99281-99285 UB Revenue: 045x, 0981</p> <p><u>ICD-9-CM Diagnosis Codes to Identify Exclusions</u> (Clinically Appropriate Indications for Low Back Imaging) Cancer: 140-209, 230-239, V10 Trauma: 800-839, 850-854, 860-869, 905-909, 926.11, 926.12, 929, 952, 958-959 IV Drug Abuse: 304.0-304.2, 304.4, 305.4-305.7 Neurologic Impairment: 344.60-729.2</p> <p><u>Codes to Identify Imaging Studies:</u> CPT: 72010, 72020, 72052, 72100, 72110, 72114, 72120, 72131-72133, 72141, 72142, 72146-72149, 72156, 72158, 72200, 72202, 72220 UB Revenue: 0320, 0329, 0350, 0352, 0359, 0610, 0612, 0614, 0619, 0972</p>	
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MMA – Medication Management for People With Asthma	<p>The percentage of members 5 to 64 years of age during the measurement year who are identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period.</p> <p>Two rates are reported:</p> <ol style="list-style-type: none"> 1. The percentage of members who remained on an asthma controller medication for at least 50 percent of their treatment period. 2. The percentage of members who remained on an asthma controller medication for at least 75 percent of their treatment period. 	<p>ICD-9 Code to Identify Asthma: 493.0, 493.1, 493.8, 493.9</p> <p>Codes to Identify Outpatient Visits: CPT: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99382-99386, 99392-99396, 99401-99404, 99411, 99412, 99420, 99429 UB Revenue: 051x, 0520-0523, 0526-0529, 057x-059x, 0982, 0983</p> <p>Codes to Identify Acute Inpatient Visits: 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</p> <p>Codes to Identify ED Visits: CPT: 99281-99285 UB Revenue: 045x, 0981</p> <p>ICD-9 Codes to Identify Required Exclusions: Emphysema: 492, 518.1, 518.2 COPD: 491.2, 493.2, 496. 506.4 Cystic Fibrosis: 277.0 Acute Respiratory Failure: 518.81</p>	Claims/Encounter
MPM – Annual Monitoring for Patients on Persistent Medications*	<p>The percentage of members 18 years old and older who received at least 180 treatment days of ambulatory medication therapy for a select therapeutic agent during the measurement year and at least</p>	<p>CPT Codes to Identify Physiologic Monitoring Tests: Lab Panel: 80047, 80048, 80050, 80053, 80069 Serum Potassium (K+): 80051, 84132 Serum Creatinine (SCr): 82565, 82575 Blood Urea Nitrogen (BUN): 84520, 84525</p>	Claims/Encounter

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	<p>one therapeutic monitoring event for the therapeutic agent in the measurement year</p> <ul style="list-style-type: none"> Annual monitoring for members on angiotensin converting enzyme (ACE) inhibitors, angiotensin receptor blockers (ARB), digoxin, or diuretics with serum potassium and either a serum creatinine or blood urea nitrogen Annual monitoring for members on anticonvulsants with drug serum concentration <p>Note: Medications dispensed in the year prior to the measurement year must be counted toward the 180 treatment days.</p>	<p>CPT Codes to Identify Drug Serum Concentration Monitoring Tests:</p> <p>Drug Serum Concentration for Phenobarbital: 80184</p> <p>Drug Serum Concentration for Phenytoin: 80185, 80186</p> <p>Drug Serum Concentration for Valproic Acid or Divalproex Sodium: 80164</p> <p>Drug Serum Concentration for Carbamazepine: 80156, 80157</p>	
MRP – Medication Reconciliation Post-Discharge	The percentage of discharges from Jan. 1 to Dec. 1 of the measurement year for members 66 years old and older for whom medications were reconciled on the day of discharge or within 30 days of discharge.	<p>Codes to Identify Medication Reconciliation:</p> <p>CPT Cat. II: 1111F</p>	Claims/Encounter and/or Medical Record Review
OMW – Osteoporosis Management in Women Who Had a Fracture*	The percentage of women 67 years old and older who suffered a fracture and who had either a bone mineral density (BMD) test or prescription for a drug to treat or prevent osteoporosis in the six months after the fracture.	<p>Codes to Identify Fractures (fractures of finger, toe, face and skull are not included in this measure):</p> <p>CPT: 21800, 21805, 21810, 21820, 21825, 22305, 22310, 22318, 22319, 22520, 22521, 22523, 22524, 23500, 23505, 23515, 23570, 23575, 23585, 23600, 23605, 23615, 23616, 23620, 23625, 23630, 23665, 23670, 23675, 23680, 24500, 24505, 24515, 24516, 24530, 24535, 24538, 24545, 24546,</p>	Claims/Encounter

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		<p>24560, 24565, 24566, 24575-24577, 24579, 24582, 24620, 24635, 24650, 24655, 24665, 24666, 24670, 24675, 24685, 25500, 25505, 25515, 25520, 25525, 25526, 25530, 25535, 25545, 25560, 25565, 25574, 25575, 25600, 25605-25609, 25622, 25624, 25628, 25630, 25635, 25645, 25650, 25651, 25652, 25680, 25685, 26600, 26605, 26607, 26608, 26615, 27193, 27194, 27200, 27202, 27215-27218, 27220, 27222, 27226-27228, 27230, 27232, 27235, 27236, 27238, 27240, 27244, 27245, 27246, 27248, 27254, 27267-27269, 27500-27503, 27506-27511, 27513, 27514, 27520, 27524, 27530, 27532, 27535, 27536, 27538, 27540, 27750, 27752, 27756, 27758-27760, 27762, 27766-27769, 27780, 27781, 27784, 27786, 27788, 27792, 27808, 27810, 27814, 27816, 27818, 27822-27828, 28400, 28405, 28406, 28415, 28420, 28430, 28435, 28436, 28445, 28450, 28455, 28456, 28465, 28470, 28475, 28476, 28485, 29850, 29851, 29855, 29856</p> <p>HCPCS: S2360</p> <p>ICD-9-CM Diagnosis: 733.1, 733.93-733.98, 805-806, 807.0-807.4, 808-815, 818-825, 827, 828</p> <p>ICD-9-CM Procedure: 79.01-79.03, 79.05-79.07, 79.11-79.13, 79.15-79.17, 79.21-79.23, 79.25-79.27, 79.31-79.33, 79.35-79.37, 79.61-79.63, 79.65-79.67, 81.65, 81.66</p> <p><u>Codes to Identify Bone Mineral Density Test:</u></p> <p>CPT: 76977, 77078-77083, 78350, 78351</p> <p>HCPCS: G0130</p> <p>ICD-9-CM Procedure: 88.98</p> <p><u>Codes to Identify Outpatient Visits:</u></p> <p>CPT: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391- 99397, 99401-99404, 99411,</p>	
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		<p>99412, 99420, 99429, 99455</p> <p>HCPCS: G0402, G0438, G0439</p> <p>UB Revenue: 051x, 0520-0523, 0526-0529, 0982, 0983</p> <p><u>Codes to Identify Acute Inpatient Visits:</u> 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</p> <p><u>Codes to Identify ED Visits:</u> CPT: 99281-99285 UB Revenue: 045x, 0981</p>	
PBH – Persistence of Beta Blocker Treatment After a Heart Attack	The percentage of members 18 years old and older during the measurement year who were hospitalized and discharged alive from July 1 of the year prior to the measurement year to June 30 of the measurement year with a diagnosis of acute myocardial infarction (AMI) and who received persistent beta blocker treatment for six months after discharge.	<p><u>Code to Identify AMI:</u> ICD-9-CM Diagnosis: 410.x1</p> <p><u>ICD-9-CM Diagnosis Codes to Identify Exclusions:</u> History of Asthma: 493 Hypotension: 458 Heart Block >1 Degree: 426.0, 426.12, 426.13, 426.2-426.4, 426.51-426.54, 426.7 Sinus Bradycardia: 427.8 COPD: 491.2, 496, 506.4</p> <p><i>Exclusion: Intolerance or allergy to beta blocker therapy</i></p>	Claims/Encounter

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PCE – Pharmacotherapy Management of Chronic Obstructive Pulmonary Disease (COPD) Exacerbation	<p>The percentage of COPD exacerbations for members 40 years old and older who had an acute inpatient discharge or emergency department encounter between Jan. 1 to Nov. 30 of the measurement year and who were dispensed appropriate medications</p> <p>Two rates are reported:</p> <ol style="list-style-type: none"> 1. Dispensed a systemic corticosteroid within 14 days of the event. 2. Dispensed a bronchodilator within 30 days of the event. 	<p><u>ICD-9-CM Diagnosis Codes to Identify COPD:</u></p> <p>Chronic Bronchitis: 491 Emphysema: 492 COPD: 493.2, 496</p> <p><u>Codes to Identify Visit Type:</u></p> <p>Acute Inpatient: UB Revenue: 010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 016x, 020x, 021x, 072x, 0987</p> <p>Emergency Department: (Does not include ED visits that result in an inpatient admission) CPT: 99281-99285 UB Revenue: 045x, 0981</p>	Claims/Encounter
SPR – Use of Spirometry Testing in the Assessment and Diagnosis of COPD*		<p><u>ICD-9 Codes to Identify COPD:</u></p> <p>Chronic Bronchitis: 491 Emphysema: 492 COPD: 493.2, 496</p> <p><u>Codes to Identify Visit Type:</u></p> <p>Outpatient: CPT: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99385-99387, 99393-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456</p> <p>HCPCS: G0402, G0438, G0439</p>	Claims/Encounter

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		<p>UB Revenue: 051x, 0520-0523, 0526-0529, 0982, 0983</p> <p>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</p> <p>Emergency Department: CPT: 99281-99285 UB Revenue: 045x, 0981 CPT Codes to Identify Spirometry Testing: 94010, 94014-94016, 94060, 94070, 94375, 94620</p>	
<p>SSD – Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications</p>	<p>The percentage of members 18 to 64 years old with schizophrenia or bipolar disorder who were dispensed an antipsychotic medication and had diabetes screening test during the measurement year.</p>	<p>Codes to Identify Visit Type: Acute Inpatient: CPT With Place of Service (POS) Codes: CPT: 90791, 90792, 90801, 90802, 90816-90819, 90821-90824, 90826-90829, 90832-90840, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291 With POS: 21, 51 UB Revenue: 010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 016x, 020x, 021x, 072x, 0987 Outpatient, Intensive Outpatient and Partial Hospitalization: CPT: 90791, 90792, 90804-90815, 90832-90840, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411, 99412, 99510 HCPCS: G0155, G0176, G0177, G0409-G0411, H0002, H0004, H0031,</p>	<p>Claims/Encounter</p>

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		<p>H0034-H0037, H0039, H0040, H2000, H2001, H2010-H2020, M0064, S0201, S9480, S9484, S9485</p> <p>UB Revenue: 0510, 0513, 0516, 0517, 0519-0523, 0526-0529, 0900, 0901, 0902-0905, 0907, 0911-0917, 0919, 0982, 0983</p> <p>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, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291 With POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 20, 22, 24, 33, 49, 50, 52, 53, 71, 72</p> <p><u>Emergency Department:</u> CPT: 90791, 90792, 90832-90840, 99281-99285</p> <p>CPT With Place of Service (POS) Codes: CPT: 90801, 90802, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90875, 90876, 99291 With POS: 23</p> <p>UB Revenue: 045x, 0981</p> <p><u>Nonacute Inpatient:</u> CPT: 90791, 90792, 90832-90840, 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337</p> <p>HCPCS: H0017-H0019, T2048</p> <p>UB Revenue: 0118, 0128, 0138, 0148, 0158, 019x, 0524, 0525, 055x, 066x, 1000, 1001, 1003-1005</p> <p>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, 99291 With POS: 31, 32, 56</p> <p>ICD-9-CM Diagnosis Codes to Identify Schizophrenia: 295</p>	
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		<p>ICD-9-CM Diagnosis Codes to Identify Bipolar Disorder: 296.0, 296.1, 296.4, 296.5, 296.6, 296.7</p> <p>HCPCS Codes to Identify Antipsychotic Medications: J1631, J2358, J2426, J2680, J2794</p> <p>Codes to Identify Diabetes Screening: CPT: 80047, 80048, 80050, 80069, 82947, 82950, 82951 LOINC: 1518-0, 1554-5, 10450-5, 14995-5, 17865-7</p>	
SMD – Diabetes Monitoring for People With Diabetes and Schizophrenia	The percentage of members 18 to 64 years old with schizophrenia and diabetes who had both an LDL-C test and an HbA1c test done during the measurement year.	<p>Codes to Identify Visit Type: <u>Acute Inpatient:</u> 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, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291 With POS: 21,51 UB Revenue: 010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 016x, 020x, 021x, 072x, 0987 <u>Outpatient, Intensive Outpatient and Partial Hospitalization:</u> CPT: 90804-90815, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 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 UB Revenue: 0510, 0513, 0516, 0517, 0519-0523, 0526-0529, 0900, 0901, 0902-0905, 0907, 0911-0917, 0919, 0982, 0983 CPT With Place of Service (POS) Codes: CPT: 90801, 90802, 90816-90819, 90821-90824, 90826-90829, 90845,</p>	Claims/Encounter

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		<p>90847, 90849, 90853, 90857, 90862, 90870, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291 With POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 20, 22, 24, 33, 49, 50, 52, 53, 71, 72</p> <p><u>Emergency Department:</u></p> <p>CPT: 99281-99285</p> <p>CPT With Place of Service (POS) Codes:</p> <p>CPT: 90801, 90802, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90875, 90876, 99291 With POS: 23</p> <p>UB Revenue: 045x, 0981</p> <p><u>Nonacute Inpatient:</u></p> <p>CPT: 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337</p> <p>HCPCS: H0017-H0019, T2048</p> <p>UB Revenue: 0118, 0128, 0138, 0148, 0158, 019x, 0524, 0525, 055x, 066x, 1000, 1001, 1003-1005</p> <p>CPT With Place of Service (POS) Codes:</p> <p>CPT: 90801, 90802, 90816-90819, 90821-90824, 90826-90829, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90875, 90876, 99291 With POS: 31, 32, 56</p> <p>ICD-9-CM Diagnosis Codes to Identify Schizophrenia: 295</p> <p><u>Codes to Identify Visit Type for Diabetes:</u></p> <p><u>Acute Inpatient:</u></p> <p>CPT: 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291</p> <p>UB Revenue: 010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 016x, 020x, 021x, 072x, 080x, 0987</p> <p><u>Nonacute Inpatient:</u></p> <p>CPT: 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337</p>	
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		UB Revenue: 0118, 0128, 0138, 0148, 0158, 019x, 0524, 0525, 055x, 066x Outpatient: CPT: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456 UB Revenue: 051x, 0520-5023, 0526-0529, 057x-059x, 082x-085x, 088x, 0983 <u>Emergency Department:</u> CPT: 99281-99285 UB Revenue: 045x, 0981 ICD-9-CM Diagnosis Codes to Identify Diabetes: 250, 357.2, 362.0, 366.41, 648.0	
SMC – Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	The percentage of members 18 to 64 years old with schizophrenia and cardiovascular disease who had an LDL-C test during the measurement year.	<u>Codes to Identify Visit Type:</u> <u>Acute Inpatient:</u> 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, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291 With POS: 21, 51 UB Revenue: 010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 016x, 020x, 021x, 072x, 0987 <u>Outpatient, Intensive Outpatient and Partial Hospitalization:</u> CPT: 90804-90815, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 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	Claims/Encounter

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		<p>UB Revenue: 0510, 0513, 0516, 0517, 0519-0523, 0526-0529, 0900, 0901, 0902-0905, 0907, 0911-0917, 0919, 0982, 0983</p> <p>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, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291 With POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 20, 22, 24, 33, 49, 50, 52, 53, 71, 72</p> <p><u>Emergency Department:</u> CPT: 99281-99285</p> <p>CPT With Place of Service (POS) Codes: CPT: 90801, 90802, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90875, 90876, 99291 With POS: 23</p> <p>UB Revenue: 045x, 0981</p> <p><u>Nonacute Inpatient:</u> CPT: 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337</p> <p>HCPCS: H0017-H0019, T2048</p> <p>UB Revenue: 0118, 0128, 0138, 0148, 0158, 019x, 0524, 0525, 055x, 066x, 1000, 1001, 1003-1005</p> <p>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, 99291 With POS: 31, 32, 56</p> <p>ICD-9-CM Diagnosis Codes to Identify Schizophrenia: 295</p> <p><u>Codes to Identify AMI, PCI, and CABG:</u> CPT: 33510-33514, 33516-33519, 33521-33523, 33533-33536 92980, 92982, 92995</p>	
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		<p>HCPCS: S2205-S2209, G0290 ICD-9-CM Procedure: 36.1, 36.2, 00.66, 36.06, 36.07 ICD-9-CM Diagnosis: 410.x1</p> <p><u>Codes to Identify Visit Type for IVD:</u> Acute Inpatient: CPT: 99221-99223, 99231-99233, 99238, 99239, 99251-99256, 99291 UB Revenue: 010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 016x, 020x, 021x, 072x, 0987 Outpatient: CPT: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411, 99412, 99420, 99455, 99456 UB Revenue: 051x, 0520-0523, 0526-0529, 057x-059x, 0982, 0983 ICD-9-CM Diagnosis Codes to Identify IVD: 411, 413, 414.0, 414.2, 414.8, 414.9, 429.2, 433-434, 440.1, 440.2, 440.4, 444, 445</p>	
SAA – Adherence to Antipsychotic Medications for Individuals With Schizophrenia	The percentage of members 19 to 64 years old during the measurement year with schizophrenia who were dispensed and remained on an antipsychotic medication for at least 80 percent of their treatment period.	<p><u>Codes to Identify Visit Type:</u> <u>Acute Inpatient:</u> 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, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291 With POS: 21, 51 UB Revenue: 010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 016x, 020x, 021x, 072x, 0987 <u>Outpatient, Intensive Outpatient and Partial Hospitalization:</u> CPT: 90804-90815, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411, 99412, 99510</p>	Claims/Encounter

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		<p>HCPCS: G0155, G0176, G0177, G0409-G0411, H0002, H0004, H0031, H0034-H0037, H0039, H0040, H2000, H2001, H2010-H2020, M0064, S0201, S9480, S9484, S9485</p> <p>UB Revenue: 0510, 0513, 0516, 0517, 0519-0523, 0526-0529, 0900, 0901, 0902-0905, 0907, 0911-0917, 0919, 0982, 0983</p> <p>CPT With Place of Service (POS) Codes:</p> <p>CPT: 90801, 90802, 90816-90819, 90821-90824, 90826-90829, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291 With POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 20, 22, 24, 33, 49, 50, 52, 53, 71, 72</p> <p><u>Emergency Department:</u></p> <p>CPT: 99281-99285</p> <p>CPT With Place of Service (POS) Codes:</p> <p>CPT: 90801, 90802, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90875, 90876, 99291</p> <p>POS: 23</p> <p>UB Revenue: 045x, 0981</p> <p><u>Nonacute Inpatient:</u></p> <p>CPT: 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337</p> <p>HCPCS: H0017-H0019, T2048</p> <p>UB Revenue: 0118, 0128, 0138, 0148, 0158, 019x, 0524, 0525, 055x, 066x, 1000, 1001, 1003-1005</p> <p>CPT With Place of Service (POS) Codes:</p> <p>CPT: 90801, 90802, 90816-90819, 90821-90824, 90826-90829, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90875, 90876, 99291 With POS: 31, 32, 56</p> <p>ICD-9-CM Diagnosis Code to Identify Schizophrenia: 295</p>	
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