

ADULT MEASURES (19 through 64 years)	GUIDELINE	HEDIS COMPLIANT CPT/ICD9 CODES DOCUMENTATION TIPS
Well Care		
Access to Ambulatory Care	Ensure a preventive or other ambulatory care visit annually.	<u>Visit</u> : ICD-9 Diag: V70.0, V70.3, V70.5, V70.6, V70.8, V70.9; CPT: 99201-99205, 99211-99215, 99241-99245; 99385-99387, 99395-99397, 99401-99404, 99411, 99412, 99420, 99429
Adult Body Mass Index	Screen adults 18-74 yrs old for obesity by documenting a BMI value at least every two years. Weight must be documented in medical record.	<u>BMI</u> : ICD-9: V85.0-V85.5; HCPCS: G0402
Advising Smokers to Quit	Document smoking cessation advice for smokers at least annually, including: Discussion of cessation medications Discussion of cessation strategies/methods	Reported through CAHPS Health Plan survey
Breast Cancer Screening	Ensure that women 40-69 yrs old receive a mammogram every 2 years.	<u>Mammogram</u> : ICD-9 Proc: 87.36, 87.37 CPT: 77055-77057; HCPCS: G0202,G0204,G0206
Cervical Cancer Screening	Ensure that women 21-64 yrs old receive a Pap test every 3 years.	<u>Pap Test</u> : ICD-9 Proc: 91.46, CPT: 88141-88143, 88147,88148, 88150; HCPCS: G0123, G0124, G0141, G0143-G0145, G0145, G0147, G0148
Chlamydia Screening	Screen sexually active women 16-24 yrs old annually.	<u>Chlamydia Screen</u> : CPT: 87110, 87270, 87320, 87490 - 87492, 87810 Do not use CPT code 87800 for routine chlamydia screening; it is not specific to Chlamydia and is not HEDIS-compliant.
Colorectal Cancer Screening	Screen adults 50-75 yrs old using one of three methods: 1. Fecal occult blood test (FOBT) annually 2. Flexible Sigmoidoscopy every 5 years 3. Colonoscopy every 10 years (<i>preferred screening</i>)	<u>FOBT</u> : CPT: 82270, 82274; HCPCS: G0328, <u>Flex Sig</u> : ICD-9 Proc: 45.24; CPT: 45330-45335; 45337-45342, 45345; HCPCS: G0104 <u>Colonoscopy</u> : ICD-9 Proc: 45.22, 45.23;45.25, 45.42, 45.43 CPT: 44388-44394, 44397, 45355, 45378-45387; HCPCS: G0105, G0121

Dental Visit	Refer adults 19-21 yrs old to the dentist annually.	Healthplex is Affinity's dental benefit manager. Contact them at 1-800-468-9868 or go to www.Healthplex.com for a list of dental providers. Contact Affinity's QM Department at 718-794-6034 for a list of preferred dentists in your neighborhood.
Flu Shots	Vaccinate adults 50-64 yrs old for influenza annually.	Reported through CAHPS Health Plan survey
Prenatal and Postpartum Care	<p>1. Conduct an initial visit within the first trimester or within 42 days of enrollment with Affinity Health Plan.</p> <p>2. Conduct a postpartum visit between 21 and 56 days after delivery (3 to 8 weeks).</p>	<p><u>Prenatal Visit</u>: CPT: 99201-99205; 99211-99215, 99241-99245, 99271-99275 with ICD9: V22, V23 or CPT: 59400, 59510, 59610, 59618, 59425, 59426; CPT II*: 0500F, 0501F, 0502F</p> <p><u>Postpartum Visit</u>: CPT: 59430; 58300, 57170; ICD9: V24.1, V24.2, V25.1, V72.3, V76.2</p> <p>1. Do not use V24.0, counseling, prenatal or infection codes as only coding as they are not HEDIS-compliant for this visit. 2. Always use CPT codes listed above, or V24.1 or V24.2 3. May bill >1 PPV (e.g., C-section check plus 6 week PPV)</p>
Frequency of Ongoing Prenatal Care	Conduct 14 prenatal visits during a 40 week gestation: Every 4 weeks during first 28 weeks Every 2-3 weeks until 36th week Every week until birth after 36th week	<u>Prenatal Visit</u> : CPT: 99201-99205; 99211-99215, 99241-99245, 99271-99275 with ICD9: V22, V23 or CPT: 59400, 59510, 59610, 59618, 59425, 59426; CPT II*: 0500F, 0501F, 0502F
Acute Care		
Avoidance of Antibiotic Treatment with Acute Bronchitis	<u>Do not prescribe antibiotics</u> for a diagnosis of acute bronchitis. Age of patients in this measure is 18-64.	<p><u>Acute Bronchitis</u>: ICD9: 466.0</p> <p>Prescribe antibiotics only if you document an additional and/or different diagnosis.</p> <p>Differentiate acute from chronic bronchitis and use correct codes; do not use codes interchangeably or use same code for both conditions.</p>
Use of Imaging Studies for Low Back Pain (LBP)	<p>Do not order imaging studies for the first 28 days after <u>initial</u> diagnosis of LBP; treat low back pain conservatively following initial diagnosis. Patients in measure are 18-50 years of age.</p> <p>1. Look back at least 12 months for exclusions, but can only exclude cancer, IV drug abuse, neurological impairment and</p>	<p><u>LBP</u>: ICD-9: 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> <p><u>Imaging Studies</u>: CPT: 72010, 72020, 72052, 72100, 72110, 72114, 72120, 72131-72133, 72141-72142, 72146-72149, 72156, 72158, 72200, 72202, 72220</p>

	recent severe trauma. 2. Look back for no prior LBP diagnosis within 6 months.	
Chronic		
Adherence to Antipsychotic Medication for Individuals with Schizophrenia	Ensure your patients 19-64 years old remain on their antipsychotic medicines for at least 80% of their treatment period. The treatment period is defined as the period of time between the date of first prescription in the measurement year and the end of the measurement year.	<u>Please see attached table for a full list of antipsychotic medications</u>
Antidepressant Medication Management	For <u>newly diagnosed</u> patients 18 years and older with major depression, maintain on medication for: Acute Phase: at least 84 days Continuation Phase: at least 180 days	<u>Major Depression</u> : ICD-9: 296.20-296.25, 296.30-296.35, 298.0, 311 Antidepressant Medications The look back for negative diagnosis history is 4 months and negative medication history is 3 months. Event date = diagnosis with medication fill up to 30 days prior and 14 days after diagnosis date.
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Perform an LDL-C screening at least annually for patients 18-64 with schizophrenia and cardiovascular disease	<u>LDL-C</u> : CPT: 80061, 83700, 83701, 83704,83721; CPT II*: 3048F, 3049F, 3050F
Cholesterol Management for Patients with Cardiovascular Disease	Perform LDL-C screening at least annually: control goal <100mg/dL For patients 18-75 with: 1. AMI, CABG or PCTA at hospital discharge 2. Ischemic vascular disease (IVD) diagnosis in ambulatory setting	<u>LDL-C</u> : CPT: 80061, 83700, 83701, 83704,83721; CPT II*: 3048F, 3049F, 3050F <u>IVD</u> : ICD9: 411, 413, 414.0, 414.2, 414.8, 414.9, 429.2, 433-434, 440.1, 440.2, 440.4, 444, 445 If LDL-C is <100mg/dl, code 3048F If LDL-C is ≥100mg/dl, code 3049F or 3050F
Comprehensive Diabetes Care (members 18-75)	For patients 18-75: 1. Perform Hb A1c at least annually: control goal <7.0% and <8.0% 2. Perform LDL-C at least annually: control goal < 100mg/dL 3. Ensure a retinal exam by an eye care specialist annually 4. Perform nephropathy screening annually: microalbumin test or ACE/ARB prescription	<u>HbA1c</u> : CPT: 83036, 83037; CPT II: 3044F, 3045F, 3046F <u>LDL-C</u> : CPT: 80061, 83700, 83701, 83704, 83721; CPT II: 3048F, 3049F, 3050F <u>Eye Exam</u> : CPT: 99203-99205, 99213-99215, 99242- 99245 There is no code for a DRE; E&M codes are accepted as proxy, but only at the higher intensity of service codes (e.g., 99211 and 99212 are not acceptable, whereas 99213-99215 are HEDIS-compliant)

	5. Ensure blood pressure control: goal <140/80 mm Hg or <140/90 mm Hg	<u>Nephropathy Screen</u> : CPT: 82042, 82043, 82044, 84156; CPT II: 3060F-3061F <u>Blood Pressure</u> : CPT II*: Systolic 3074F, 3075F, 3077F; Diastolic 3078F, 3079F, 3080F Systolic must be <u>lower than</u> 140 and diastolic must be <u>lower than</u> 80 to be compliant
Controlling High Blood Pressure	Ensure blood pressure control for patients 18-75: control goal <140/90 mm Hg	This is a 100% medical record review measure. <u>Hypertension</u> : ICD9: 401 Using this code ensures inclusion in sample; be careful with rule out diagnoses. Systolic must be <u>lower than</u> 140 and diastolic must be <u>lower than</u> 90 to be compliant
Diabetes Monitoring for People with Diabetes and Schizophrenia	Ensure those patients aged 18-64 yrs with both diabetes and schizophrenia receive an HbA1c test and an LDL-c test during the measurement year.	<u>HbA1c</u> : CPT: 83036, 83037; CPT II: 3044F, 3045F, 3046F <u>LDL-C</u> : CPT: 80061, 83700, 83701, 83704, 83721; CPT II: 3048F, 3049F, 3050F
Diabetes Screening for People with Schizophrenia or Bipolar Disorders who are Using Antipsychotic Medications	Screen annually patients aged 18-64 yrs with schizophrenia or bipolar disease who are using antipsychotic medications for diabetes during the measurement year.	<u>Schizophrenia</u> : ICD-9 diagnosis: 295 <u>Bipolar disorder</u> : ICD-9 diagnosis: 296.0, 296.1, 296.4, 296.5, 296.6, 296.7 <u>Glucose test</u> : CPT: 80047, 80048, 80050, 80053, 80069, 82947, 82947, 82950, 82951
Disease Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis	If diagnosis of rheumatoid arthritis has been made at 2 ambulatory visits during the year, prescribe at least one disease modifying anti-rheumatic drug (DMARD) annually.	<u>Rheumatoid Arthritis</u> : ICD-9: 714.0, 714.1, 714.2, 714.81
Follow-up to Hospitalization for Mental Illness	Ensure an outpatient visit follow-up by a mental health practitioner for patients 6 years and older <u>within 7 days or 30 days</u> of hospital discharge.	Visit must be with a mental health practitioner. Beacon Health Strategies is Affinity's behavioral health provider network. Contact them at 1-800-974-6831.
HIV/AIDS Comprehensive Care	1. Conduct visits at least twice a year, with 1 visit occurring <u>between 1/1 and 6/30</u> , and 1 visit occurring <u>between 7/1 and 12/31</u> (one in the first 6 months; one in the second 6 months)	<u>Visit</u> : ICD9: V20.2,V70.0,V70.3,V70.5,V70.6, V70.8, V70.9

	<p>2. Test viral load at least twice a year, with 1 test occurring <u>between 1/1 and 6/30</u>, and 1 test occurring <u>between 7/1 and 12/31</u> (one in the first 6 months; one in the second 6 months)</p> <p>3. Perform syphilis screening annually (≥ 18 yrs)</p>	<p><u>Viral Load</u>: CPT: 87534-87536, 87537-87539</p> <p><u>Syphilis Screening</u>: CPT: 86592, 86593, 86780</p>
Medication Management for People with Asthma	<p>Follow patients 5-64 yrs prescribed asthma controller medications to ensure they are filling their prescriptions during the treatment period, i.e., the period of time beginning on the IPSD through the last day of the measurement year.</p> <p>Two rates are reported:</p> <ol style="list-style-type: none"> 1. The percentage of members who remain on the controller medications at least 50% of their treatment period. 2. The percentage of members who remain on the controller medications at least 75% of their treatment period. 	<p>ICD9: 493.0, 493.1, 493.8, 493.9</p> <p>Inhaled short acting beta agonists, systemic corticosteroids, and oral and nasal preparations are not compliant for controller medication prescribing.</p>
Asthma Medication Ratio	<p>Patients 5 – 64 yrs diagnosed with persistent asthma should be treated <u>preferably with controller medications</u>. The proportion of controller medications to all medications prescribed during the measurement year to treat asthma should be greater than 50%.</p>	<p>ICD9: 493.0, 493.1, 493.8, 493.9</p> <p>Inhaled short acting beta agonists, systemic corticosteroids, and oral and nasal preparations are not compliant for controller medication prescribing.</p>
Monitoring for Patients on Persistent Medications	<p>For patients 18 years and older who have been on the following medications <u>at least 180 days</u>, perform the following tests at least annually:</p> <ol style="list-style-type: none"> 1. ACE or ARB, Digoxin, Diuretics: <ul style="list-style-type: none"> - Serum Potassium and - Serum Creatinine or a Blood Urea Nitrogen 2. Anticonvulsant: <ul style="list-style-type: none"> - Drug Serum Concentration 	<p><u>Lab Panel</u>: CPT: 80047, 80048, 80050, 80053, 80069</p> <p><u>Serum Potassium</u>: CPT: 80051,84132</p> <p><u>Serum Creatinine</u>: CPT: 82565,82575</p> <p><u>Blood Urea Nitrogen</u>: CPT: 84520,84525</p> <p>Serum Concentration:</p> <p><u>Phenobarbital</u>: CPT: 80184</p> <p><u>Phenytoin</u>: CPT: 80185,80186</p> <p><u>Valproic Acid & Divalproex Sodium</u>: CPT: 80164</p> <p><u>Carbamazepine</u>: CPT: 80156,80157</p>

Persistence of Beta Blocker treatment after a heart attack	Prescribe beta blocker treatment <u>for 180 days</u> following hospital discharge for patients 18 years and older diagnosed with an Acute Myocardial Infarction (AMI).	<u>AMI: ICD 9:</u> 410.x1 <u>Beta-Blockers:</u> noncardioselective, cardioselective, antihypertensive combinations
Pharmacotherapy Management of COPD Exacerbation	Following a hospital discharge or an ED visit for COPD, prescribe a systemic corticosteroid <u>within 14 days</u> <i>and</i> a bronchodilator <u>within 30 days</u> for patients 40 years and older <i>The diagnosis of COPD includes Chronic Bronchitis and Emphysema</i>	<u>Chronic Bronchitis: ICD9:</u> 491 <u>Emphysema: ICD9:</u> 492 <u>COPD: ICD9:</u> 493.2, 496 Differentiate acute from chronic bronchitis and use correct code; do not use codes interchangeably or use same code for both conditions.
Use of Appropriate Medications for Asthma: 3 Controllers	Ensure at least <u>3 prescribing events</u> [^] annually for chronic asthma for patients 5-64 years. Preferred therapies: Cromolyn sodium inhaled corticosteroids, leukotriene modifiers, methylxanthines, nedocromil. Add on therapy: long-acting inhaled beta-2 agonists. [^] 1 prescribing event = ≥ 30 day supply (one prescription for a 90 day supply = 3 prescribing events)	ICD9: 493.0, 493.1, 493.8, 493.9 Inhaled short acting beta agonists, systemic corticosteroids, and oral and nasal preparations are not compliant for controller medication prescribing.
Use of Spirometry in Assessment and Diagnosis of COPD	Administer a spirometry test on patients 40 years and older within 730 days prior through 180 days after the <u>initial</u> diagnosis, to confirm the diagnosis of COPD. <i>The diagnosis of COPD includes Chronic Bronchitis and Emphysema</i>	<u>Chronic Bronchitis: ICD9:</u> 491 <u>Emphysema: ICD9:</u> 492 <u>COPD: ICD9:</u> 493.1, 496 <u>SpirometryTest: CPT:</u> 94010, 94014-94016, 94060, 94070, 94375, 94620 Differentiate acute from chronic bronchitis and use correct code; do not use codes interchangeably or use same code for both conditions. Affinity pays a bill above for codes 94010, 94060 and 94375.
* CPT II codes indicate the value of the test, procedure finding or clinical finding.		

Antipsychotic Medications:

Description	Prescription		J Codes	Covered Days
Miscellaneous antipsychotic agents	Aripiprazole Asenapine Clozapine Haloperidol Iloperidone Loxapine Lurisdone Molindone	Olanzapine Paliperidone Pimozide Quetiapine Quetiapine fumarate Risperidone Ziprasidone		
Phenothiazine antipsychotics	Chlorpromazine Fluphenazine Perphenazine Perphenazine-amitriptyline	Prochlorperazine Thioridazine Trifluoperazine		
Psychotherapeutic combinations	Fluoxetine-olanzapine			
Thioxanthenes	Thiothixene			
Long-acting injections	Fluphenazine decanoate Haloperidol decanoate	Olanzapine Paliperidone palmitate	J1631, J2358, J2426, J2680	28 days supply
	Risperidone		J2794	14 days supply