



PCP HEDIS Documentation Tips: Older Adults

HEDIS Measure Definitions	What You Can Do	Coding/Tips
<p>BCS - Breast Cancer Screening</p> <p>Women 50-74 years of age with one or more mammograms within the last 2 years.</p>	<p>Document member education on the benefits of early detection of breast cancer.</p> <p>Encourage mammography to all women who are within risk group.</p>	<p>CPT Codes: 77055-77057 HCPCS G0202, G0204, G0206 UB Rev Codes 0401, 0403 Mastectomy Codes ICD-10CM Code: Z90.13, or Z90.12 and Z90.11 ICD-10PCS Code: 0HTV0ZZ, or 0HTU0ZZ and 0HTT0ZZ CPT Codes: 19180, 19200, 19220, 19240, 19303-19307 with a Bilateral Modifier CPT Codes: 50, 09950 or LT and RT</p>
<p>MRP - Medication Reconciliation Post Discharge</p> <p>The percentage of discharges during the year for member 18 and older for whom medications were reconciled the date of discharge through 30 days after discharge</p>	<p>Documentation in the medical record must include evidence of medication reconciliation and the date it was performed.</p> <p>Regular medication review is a best practice. Have members bring all of their medications with them to appointments.</p>	<p>CPT Codes: 99495, 99496 CPT II Codes: 1111F</p>
<p>COA—Care for Older Adults</p> <p>The percentage of adults 66 years 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>Advance Care Planning - document discussion and/or presence of advance directive or living will in chart</p> <p>Medication Review - Medication list in chart with a dated notation of medication review annually by a prescribing provider</p> <p>Functional Status Assessment - Complete functional assessment must include one of the following:</p> <ul style="list-style-type: none"> - Notation that Activities of Daily Living (ADL) were assessed [or at least five of the following were assessed: bathing, dressing, eating, transferring, using toilet and walking] - Notation that Instrumental Activities of Daily Living (IADL) were assessed [or at least four of the following were assessed: shopping for groceries, driving or using public transportation, using the telephone, meal preparation, housework, home repair, laundry, taking medication, handling finances] - Result of assessment using a standardized functional status assessment tool - Notation that at least three of the following four components were assessed: cognitive status; ambulation status; hearing, vision and speech (sensory ability) ; other functional independence (exercise, ability to perform job) <p>Pain Assessment - Notations for pain assessment must include one of the following:</p> <ul style="list-style-type: none"> - Documentation that the member was assessed for pain (positive or negative finding) - Result of assessment using a standardized assessment tool <p>A pain management/treatment plan alone does not count. Either does screening for or positive chest pain alone.</p>	<p>Advance Care Planning HCPCS: S0257 CPT II: 1157F, 1158F</p> <p>Medication Review CPT: 90863, 99605, 99606, 99495, 99496 HCPCS: G8427 CPT II: 1159F, 1160F</p> <p>Functional Status Assessment CPT II: 1170F</p> <p>Pain Assessment CPT II: 1125F, 1126F</p>

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<p>CBP - Controlling High Blood Pressure</p> <p>Members 18-85 years of age with a diagnosis of hypertension (HTN) and whose BP is adequately controlled. (age 18-59 and age 60-85 with diabetes <140/90, age 60-85 without diabetes <150/90).</p>	<p>If BP elevated (140/90 or greater) at initial vital sign assessment, alleviate potential factors that might cause temporary elevation and retake BP during exam. Make sure you use the correct size cuff</p> <p>If using a machine, record the actual number, do NOT round up.</p> <p>Schedule follow up visits to monitor effectiveness of BP medication.</p>	<p>ICD-10 CM Code: I10</p> <p>Exclusions: End Stage Renal Disease (ESRD) or a kidney transplant on or prior to December 31st of the measurement year or a diagnosis of pregnancy during the measurement year, would be excluded from this measure.</p>
<p>CDC—Comprehensive Diabetes Care</p> <p>Members 18-75 years of age with diabetes should have each of the following at least annually: HbA1C testing, medical attention for nephropathy, a retinal eye exam and blood pressure monitoring at each visit.</p>	<p>Document results of HbA1C and Microalbumin exams annually or more often as needed. A current medication list indicating that a member is on an ACE/ARB medication</p> <p>Document Stage 4 chronic kidney disease or End State Renal Disease (ESRD) with appropriate codes: Stage 4 chronic kidney disease CD-10 CM: N18.4 ESRD ICD-10 CM: N18.5, N18.6, Z91.15, Z99.2 ICD-10 PCS: 3E1M39Z, 5A1D00Z, 5A1D60Z</p> <p>Refer member to Optometrist for Dilated Retinal Eye Exam annually.</p>	<p>Diabetes ICD-10 CM Codes: E10.10-E13.9, O24.011-O24.33, O24.811-O24.83 HbA1c CPT Codes: 83036, 83037 HbA1c LOINC: 17856-6, 4548-4, 4549-2 CPT II Result Codes HbA1c level 7.0-9.0: 3045F HbA1c level less than 7.0: 3044F HbA1c level greater than 9.0: 3046F</p> <p>Nephropathy Screen CPT Codes: 82042 - 82044, 84156, 3060F, 3061F Urine Macroalbumin Test CPT Codes: 81000-81003, 81005 CPT II Codes: 3062F Blood Pressure CPT Codes: Systolic BP: < 140 3074F, 3075F ; >/= to 140 3077F Diastolic BP: 80-89 3079F; < 80 3078F; >/= 90 3080F</p>
<p>Screening for Clinical Depression— A CMS Core Set Measure/HEDIS Like</p> <p>Screen members 18 and older with an age appropriate standardized screening tool. If the screen is positive, document a follow-up plan on the same date as the positive screen.</p>	<p>Common tool used is the PHQ-9 screening questionnaire. http://phqscreeners.com</p> <p>A follow-up plan must for a positive screen must include documentation of one or more of the following:</p> <ul style="list-style-type: none"> • Additional evaluation • Suicide risk assessment • Referral to a practitioner who is qualified to diagnose and treat depression • Pharmacological interventions • Other interventions or follow-up for the diagnosis or treatment of depression <p>Exclusions from screening: active diagnosis of depression or bipolar disorder, refusal to participate, urgent or emergent care required, certain court appointed cases or cases of delirium.</p>	<p>Clinical Depression Screen Codes: HCPCS G8431: Positive screen for clinical depression using a standardized tool and a follow-up plan documented. G8510: Negative screen for clinical depression using a standardized tool, patient not eligible/appropriate for follow-up plan documented. Exclusion Codes: HCPCS G8433: Screening for clinical depression not documented, patient not eligible/appropriate G8940: Screening for clinical depression documented, follow-up plan not documented, patient not eligible/appropriate.</p>
<p>AAP - Adults' Access to Preventive/ Ambulatory Health Services</p> <p>Members 20 years and older who had an ambulatory or preventive care visit during the year.</p>	<p>Each adult member should have a routine outpatient visit annually.</p> <p>Utilize your Gaps in Care report to outreach members that have not had care.</p>	<p>Adult Ambulatory/Preventive Codes for PCP Office /OP services CPT: 99201-99205, 99211-99215, 99241-99245. UB Rev Codes: 051X, 0520-0523, 0526-0529, 0982, 0983 Preventive Medicine CPT: 99385-99387, 99395-99397, 99401-99404, 99411, 99412, 99420, 99429 HCPCS: G0402, G0438, G0439 General medical examination ICD-10: Z00.00, Z00.01, Z00.121, Z00.129, Z00.5, Z00.8, Z02.0-Z02.6, Z02.71, Z02.79, Z02.81-Z02.83, Z02.89, Z02.9 Home Services CPT: 99341-99345, 99347-99350 Nursing Facility Care CPT: 99304-99310, 99315, 99316, 99318 Domiciliary, rest home or custodial care services CPT: 99324-99328, 99334-99337</p>

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<p>OMW - Osteoporosis Management in Women Who Had a Fracture</p> <p>Women 67-85 years of age who suffered a fracture and had either a bone mineral density test or were prescribed a drug to treat osteoporosis in the 6 months after a fracture.</p>	<p>Schedule women age 67-85 years old to have a bone mineral density test (BMD) within six months after a fracture if they have not had a BMD test in the prior 24 months.</p> <p>Prescribe medications to treat osteoporosis when indicated.</p>	<p>Bone Density: CPT Codes :76977, 77078 ICD-10 PCS Codes: BP48ZZ1, BP49ZZ1, BP4GZZ1, BP4HZZ1, BP4LZZ1, BP4MZZ1, BP4NZZ1, BP4PZZ1, BQ00ZZ1, BQ01ZZ1, BQ03ZZ1, BQ04ZZ1, BR00ZZ1, BR07ZZ1, BR09ZZ1, BR0GZZ1 HCPCS G0130</p> <p>Osteoporosis Medications J0630, J0897, J3110, J1740, J3487-J3489, Q2051</p>
<p>SPR -Use of Spirometry Testing in the Assessment and Diagnosis of COPD</p> <p>Members age 40years or older with a new diagnose of COPD or newly active COPD, who received appropriate spirometry to confirm the diagnosis.</p>	<p>Educate members that are newly diagnosed with COPD or newly active about the importance of spirometry testing</p>	<p>COPD ICD-10 Codes: J44.0, J44.1, J44.9, Chronic Bronchitis ICD-10CM: J41 .0, J41.1, J41.8, J42 Emphysema ICD-10 CM Codes: J43- J43.0, J43.8, J43.9</p> <p>Spirometry CPT Codes: 94010, 94014-94016, 94060, 94070, 94375, 94620</p>
<p>PCE - Pharmacotherapy Management of COPD Exacerbation</p> <p>Members age 40 and older who had an acute IP stay or ED visit with a diagnosis of COPD exacerbation and were dispensed appropriate medications. Two rates are reported:</p> <ol style="list-style-type: none"> 1. Dispensed a systemic corticosteroid (or evidence of an active prescription within 14 days of the event 2. Dispensed a bronchodilator (or evidence of an active prescription) within 30 days of the event. 	<p>Schedule follow-up appointments with these members within a few days of their hospital discharge or ED visit</p> <p>Medication reconciliation is key</p> <p>Member education regarding filling the prescriptions and appropriate use</p> <p>Order medications that are on the member formulary</p>	<p>COPD Medications Systemic Corticosteroids - Glucocorticosteroids - Betamethsone, Dexamethasone, Hydrocortisone, Methylprednisolone, Prednisolone, Prednisone, Triamcinolone Bronchodilators- Anticholinergic Agents - Albuterol-ipratropium, Ipratropium, Acclidinium-bromide, Tiotropium, Umeclidium Beta 2-agonists - Albuterol, Levalbuterol, Arformoterol, Mometasone-formoterol, Budesonide-formoterol, Metaproterenol, Fluticasone-salmeterol, Olodaterol-hydrochloride, Fluticasone-vilanterol, Pirbuterol, Formoterol, Salmeterol, Indacaterol, Umeclidinium-vilanterol Methylxanthines - Aminophylline, Dyphylline, Dyphylline-guaifenesin, Theophylline, Guaifenesin-theophylline</p>
<p>MMA– Medication Management for People With Asthma</p> <p>Members age 5-85, identified as having persistent asthma and dispensed appropriate medications that they remained on during the treatment period (end of calendar year) Two rates reported:</p> <ol style="list-style-type: none"> 1. Remained on asthma controller medication for at least 50% of the treatment period. 2. Remained on asthma controller medication for at least 75% of the treatment period. 	<p>Schedule regular follow-up for people with persistent asthma</p> <p>Patient education about benefits of medication compliance</p> <p>Order medications that are on the member formulary</p>	<p>Asthma Controller Medications Antiasthmatic Combinations - Dyphylline-guaifenesin, Guaifenesin-theophylline Antibody Inhibitor - Omalizumab Inhaled Steroid Combinations - Budesonise-formoterol, Mometasone-formoterol, Fluticasone-salmeterol Inhaled Corticosteroids - Beclomethasone, Budesonise, Ciclesonide, Flunisolide, Fluticasone CFC free, Mometasone Leukotriene Modifiers - Montelukast, Zafirlukast, Zileuton Mast Cell Stabilizers - Cromolyn Methylxanthines - Aminophylline, Dyphylline, Theophylline</p> <p>Exclusion ICD-10 CM Codes Acute Respiratory Failure: J96.00-J96.02, J96.20-J96.22 Chronic Respiratory Conditions due to Fumes/Vapors: J68.4 COPD: J44.0, J44.1, J44.9 Cystic Fibrosis: E84.0, E84.11, E84.19, E84.8, E84.9 Emphysema: J43.0-J43.2, J43.8-J43.9 Other Emphysema: J98.2, J98.3</p>
<p>ABA - Adult BMI Assessment</p> <p>Members 18-74 years of age with their body mass index (BMI) and weight documented annually.</p>	<p>Perform and document criteria of Ht/Wt/ BMI calculation at each visit.</p> <p>*Pregnant members are excluded from this measure*</p>	<p>ICD-10 CM Codes: Z68.1, Z68.20-Z68.29, Z68.30-Z68.39, Z68.41-Z68.45, Z68.51-Z68.54</p>

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<p>AMM - Antidepressant Medication Management</p> <p>Patients 18 years of age and older who were newly treated with antidepressant medication, had a diagnosis of major depression and who remained on antidepressant medication treatment. Two rates are reported:</p> <p>Effective Acute Phase: Percentage of patients who remained on an antidepressant medication for at least 84 days (12 weeks)</p> <p>Effective Continuation Phase: Percentage of patients who remained on an antidepressant medication for at least 180 days (6 months)</p>	<p>Educate patients that medication may take several weeks to become effective, they should call with any potential medication concerns/reactions</p> <p>Stress that they should not stop medication abruptly or without consulting you first for assistance</p> <p>Schedule follow up appointments prior to patient leaving your office</p> <p>Outreach patients that cancel appointments and have not rescheduled</p> <p>Stress the importance of medication compliance.</p>	<p>ICD-10 CM Codes for Major Depression: F32.0-F32.4, F32.9, F33.0-F33.3, F33.41, F33.9</p>
<p>CCS - Cervical Cancer Screening</p> <p>Women 21-64 years of age with one or more Pap tests within the last 3 years or for women 30-64 years of age, a cervical cytology and human papillomavirus (HPV) co-testing with in the last 5 years.</p>	<p>Women who have had a total hysterectomy with no residual cervix are excluded. This must be documented in history or problem list.</p> <p>Notation of Pap test located in progress notes MUST include the lab results in order to meet NCQA® requirements.</p> <p>Cervical cytology and human papillomavirus test must be completed four or less days apart in order to qualify for every 5 year testing.</p>	<p>Cervical Cytology CPT Codes: 88141-88143, 88147, 88148, 88150, 88152-88154, 88164-88167, 88174, 88175 HCPCS: G0123, G0124, G0141, G0143-G0145, G0147, G0148, P3000, P3001, Q0091 UB Rev Codes : 0923 LOINC Codes: 10524-7, 18500-9, 19762-4,19764-0, 19765-7, 19766-5, 19774-9, 33717-0, 47527-7, 47528-5 HPV CPT Codes: 87620-87622 LOINC Codes:21440-3, 30167-1, 38372-9, 49896-4, 59420-0, 75406-9, 75694-0</p>
<p>COL - Colorectal Cancer Screening</p> <p>Adults 50-75 years of age with an appropriate screening for colorectal cancer.</p>	<p>Educate members on importance of early detection. Order colonoscopy or flexible sigmoidoscopy as needed.</p> <p>Perform Fecal Occult Blood Test in-house. Proper documentation in medical record, correct diagnosis code and timely submission of data is requested.</p>	<p>Colonoscopy CPT Codes: 44388-44394, 44397, 45355, 45378-45387, 45391, 45392 ICD-9 PCS Codes: 45.22, 45.23, 45.25, 45.42, 45.43 HCPCS G0105, G0121 Flexible Sigmoidoscopy CPT Codes: 45330-45335, 45337-45342, 45345 ICD-9 PCS Code: 45.24 HCPCS: G0104 Fecal Occult Blood Test (FOBT) CPT Codes: 82270, 82274 HCPCS: G0328</p>
<p>PBH - Persistence of Beta-Blocker Treatment After a Heart Attack</p> <p>Members 18 years of age and older who were hospitalized and discharged with a diagnosis of AMI and received persistent beta-blocker treatment for six months after discharge.</p>	<p>Stress the importance of continuing the beta-blocker medication at follow-up visits.</p> <p>Advise member not to stop medication without talking with provider first.</p> <p>Consider ordering a 90 day supply if permitted by member's benefit.</p> <p>There are exclusions for intolerance or allergy to beta blockers as well as conditions listed in next column.</p>	<p>ICD-10 Codes to Identify Exclusions: History of Asthma: J45.20-J45.998 COPD: J44.0, J44.1, J44.9 Hypotension: I95.0-I95.9 Heart Block > 1st degree: I44.1-I44.7, I45.10-I45.3, I45.6, I49.5 Sinus Bradycardia: R00.1 Chronic Respiratory Conditions due to Fumes/Vapors: J68.4</p>
<p>LBP - Use of Imaging Studies for Low Back Pain</p> <p>Adults age 18-50 years old with a primary diagnosis of low back pain, who did not have an imaging study (plain x-ray, MRI or CT scan) within 28 days of the diagnosis</p>	<p>Occasional uncomplicated low back pain in adults often resolves within this 28 day time frame. Imaging before 28 days is usually unnecessary.</p> <p>Exclusions to this measure—a diagnosis of HIV or cancer anytime in the patients history or pregnancy during the measurement year. Or a diagnosis of trauma, IV drug use or neurological impairment during the 12 months prior to the low back pain diagnosis.</p>	<p>ICD-10 CM Codes for Low Back Pain: M46.46-M46.48, M47.26-M47.28, M47.816-M47.818, M47.896-M47.898, M48.06-M48.08, M51.16, M51.17, M51.26, M51.27, M51.36, M51.37, M51.46, M51.47, M51.86, M51.87, M53.2X6-M53.2X8, M53.3, M53.86-M53.88, M54.30-M54.5, M54.89, M54.9, M99.83, M99.84, S33.100A-S33.100S, S33.110A-S33.110S, S33.120A-S33.120S, S33.130A-S33.130S, S33.140A-S33.140S, S33.5XXA, S33.6XXA, S33.8XXA, S33.9XXA, S39.002A-S39.002S, S39.012A-S39.012S, S39.092A-S39.092S, S39.82XA-S39.82XS, S39.92XA-S39.92XS</p>