

2020-2021 HEDIS and VBP TIP Sheet

Adults' Access to Preventive/Ambulatory Health Services (AAP)

Description

Assesses the percentage of members 20 years and older who had an ambulatory or preventive care visit during the measurement year.

Helpful Hints

- This measure is administrative ONLY—submit claims timely with appropriate codes that reflect age-appropriate well care or office visit with PCP or specialist
- See select sample (not all inclusive) of preventive or office visit CPT codes below

| CPT Codes | |
|-------------|--|
| 99201-99205 | Visit for evaluation/management new patient |
| 99212-99215 | Visit for evaluation/management established patient |
| 99385 | Preventive visit new patient age: 18 to 39 years |
| 99386 | Preventive visit new patient age: 40 to 64 years |
| 99395 | Preventive visit established patient age: 18 to 39 years |
| 99396 | Preventive visit established patient age: 40 to 64 years |

Asthma Medication Ratio (AMR)

Description

Assesses the percentage of members 5–64 years of age identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

Helpful Hints

- Encourage members to take their controller medication as ordered
- Encourage member to get refill of controller medications
- Formulary medications qualify for 90-day fills

Asthma Controller Medications (not all inclusive)

| Description | Prescription Name (Brand Name) |
|-------------------------------------|---|
| Inhaled steroid combinations | <ul style="list-style-type: none"> • Fluticasone-salmeterol (Wixela*) • Fluticasone-salmeterol (Airduo*) • Budesonide-formoterol (Symbicort) • Fluticasone-vilanterol (Breo) • Formoterol-mometasone (Dulera) |
| Inhaled corticosteroids | <ul style="list-style-type: none"> • Beclomethasone (Qvar*) • Fluticasone Furoate (Arnuity Ellipta*) • Flunisolide (Aerospan) • Budesonide (Pulmicort) • Fluticasone Propionate (Flovent) • Ciclesonide (Alvesco) • Mometasone (Asmanex) |
| Leukotriene modifiers | <ul style="list-style-type: none"> • Montelukast* • Zafirlukast* |
| Methylxanthines | <ul style="list-style-type: none"> • Theophylline* |

*Formulary preferred products

Asthma Reliever Medication

| Description | Prescription Name (Brand Name) |
|--|---|
| Short-acting, inhaled beta-2 agonists | <ul style="list-style-type: none"> • Albuterol • Levalbuterol |

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Breast Cancer Screening (BCS)

Description

Women 52 - 74 years of age as of December 31, 2021, who had at least one mammogram between October 1, 2019 and December 31, 2021.

Helpful Hints

- Diagnostic mammograms are not compliant
- Health plan can assist members in finding the nearest mammography center

Mammogram CPT Codes

77061-77063, 77065-77067

Chlamydia Screening in Women (CHL)

Description

Sexually active females between the ages of 16–24 years old should be tested for chlamydia each year.

Chlamydia Test CPT Codes

87110, 87270, 87320, 87490, 87491, 87492, 87810

Cervical Cancer Screening (CCS)

Description

Women 21 - 64 years of age who were screened for cervical cancer using either of the following criteria:

- Women age 21–64 who had cervical cytology (PAP) performed every 3 years.
- Women age 30–64 who had cervical cytology (PAP) human papillomavirus (HPV) co-testing; OR had human papillomavirus (HPV) performed every 5 years.

Helpful Hints

- Whenever possible document hysterectomy type (total, partial) specify if cervix is absent or if PAP is no longer indicated.
- Documentation of “vaginal hysterectomy” meets criteria for documentation of hysterectomy with no residual cervix.
- Medical record must have cervical cytology test date and results and HPV test date and results

CPT Codes

| | |
|--------------------------|--|
| Cervical Cytology | 88141-88143, 88147-88148, 88150, 88152-88154, 88164-88167, 88174-88175 |
| HPV Test | 87624-87625 |

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Comprehensive Diabetes Care (CDC)

Description

Members 18–75 years of age with diabetes (type 1 and type 2) who had each of the following components:

- **HbA1c Screening and Control** - Identify and document the most recent date of service in measurement year.
- **Eye Exam** - An eye screening for diabetic retinal disease.

This includes diabetics who had one of the following:

- A retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement year.
- **BP Control** - The last BP taken during the measurement year.
 - Members whose BP was <140/90 mm Hg

Helpful Hints

- **A1c Test and Control**
 - Remember to reschedule members for repeat A1c prior to end of year if A1c is ≥ 8.0
 - Encourage members to take medications
- **Eye exam** - Document the following:
 - Date of bilateral eye enucleation
 - Date of birth on the medical record, not just the age of the member
- **Blood Pressure**
 - BPs taken by any digital device and reported by the member and recorded in the members chart are acceptable.
 - All guidelines mentioned under CBP also apply for the BP of diabetes care

| CPT and CPT II Codes | |
|---|--|
| A1c Test | CPT - 83036-83037 |
| A1c Control <ul style="list-style-type: none"> • <7% • $\geq 7\%$ and <8% • $\geq 8\%$ and $\leq 9\%$ • >9% | CPT II <ul style="list-style-type: none"> • 3044F • 3051F • 3052F • 3046F |
| Eye Exam <ul style="list-style-type: none"> • Imaging of retina; automated analysis & report • Retinal eye exam with retinopathy • 7 standard field stereoscopic retinal photos results documented and reviewed, positive for retinopathy • 7 standard field stereoscopic retinal photos results documented and reviewed, negative for retinopathy | CPT <ul style="list-style-type: none"> • 92229 CPT II <ul style="list-style-type: none"> • 2022F • 2024F • 2025F |
| BP Control <ul style="list-style-type: none"> • See CPT II codes listed under Controlling Blood Pressure | |

Kidney Health Evaluation for Patients with Diabetes (KED)

Description

Members 18–85 years of age with diabetes (type 1 and type 2) who received both an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ration (uACR) on the same or different dates of service.

- **eGFR; AND**
- **uACR** identified as having both a quantitative urine albumin test and a urine creatinine test with service dates four or less days apart

Helpful Hints

- This is administrative only measure—submit claims timely with appropriate codes that reflect appropriate testing
- Educate members on how diabetes can affect their kidney health
- Encourage members to take medications as prescribed

| Sample of approved CPT Codes (not all inclusive) | |
|--|---|
| eGFR | 80047-80048; 80050; 80053; 80069; 82565 |
| Quantitative Urine Albumin Lab Test | 82043 |
| Urine Creatinine Lab Test | 82570 |

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Controlling Blood Pressure (CBP)

Description

Assesses members 18–85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled (<140/90 mm HG) during the measurement year. The representative BP is the last BP reading during the measurement year.

Helpful Hints

- BP must be <140/90
- Recheck any blood pressure reading $\geq 140/90$ on **day of service and document all BP values taken during the visit**
- If BP is not controlled, schedule member for follow up appt for BP recheck
- Encourage members to refill their medications, and take medication as ordered
- Order 90-day refills for formulary agents
- **Documentation in the medical record of BP readings reported or taken by the member are acceptable**

| Systolic--CPT II Codes | | Diastolic—CPT II Codes | |
|---------------------------------|-------|--------------------------------|-------|
| Blood pressure <130 mm Hg | 3074F | Blood pressure <80 mm Hg | 3078F |
| Blood pressure 130-139 mm Hg | 3075F | Blood pressure 80 – 89 mm Hg | 3079F |
| Blood pressure ≥ 140 mm Hg | 3077F | Blood pressure ≥ 90 mm Hg | 3080F |

Childhood Immunization Status (CIS)

Description

Children who turned 2 years old during the calendar year must have the following on or before their 2nd birthday.

Combo 10 includes the following:

- 4 doses - PCV (Pneumococcal conjugate vaccine)
- 4 doses - DTaP/dt (Diphtheria and tetanus toxoids and acellular)
- 3 doses - IPV (Poliovirus vaccine)
- 3 doses - Hep B (Hepatitis B)
- 3 doses - Hib (Hemophilus influenzae type B conjugate)
- 1 dose - MMR (Measles, mumps, and rubella)
- 1 dose - VZV (Chicken Pox)
- 1 dose - Hep A (Hepatitis A)
- 2 doses - Influenza (if LAIV* was administered, it must have been given on child's 2nd birthday)
- 2 doses - Rotavirus Monovalent (Rotarix - RVI) **OR** 3 doses - Rotavirus Pentavalent (RotaTeq – TIV)

Helpful Hints

- All immunizations must be given on or BEFORE the child's 2nd birthday
- The LAIV nasal flu spray MUST be given **ON** the child's second birthday
- Encourage and offer flu shots during the months of September through May
- If the parent or guardian state the child had a flu shot somewhere else, be sure to document in the medical record the date and injection given
- For the first Hep B injection documentation that states "given at birth" is sufficient documentation
- If child has an anaphylactic reaction due to vaccination, document appropriately the reaction and submit the appropriate CPT code.
- Specify if rotavirus monovalent (Rotarix) or 3 dose rotavirus pentavalent (RotaTeq) was given
- Use the appropriate CVX or CPT codes
- Be sure to send all information to Maryland Immunet

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Adolescent Immunizations (IMA)

Description

Adolescents 13 years of age who had one dose of meningococcal vaccine, one tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap) and completed the human papillomavirus (HPV) vaccine series **by their 13th birthday**.

- **Combo 1** - Must have one Meningococcal and one Tdap vaccinations.
- **Combo 2** - Must have one Meningococcal, one Tdap and HPV two (2) dose or three (3) dose series

Meningococcal: At least one meningococcal vaccine with a date of service on or between the member's 11th and 13th birthdays.

Tdap: At least one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine with a date of service on or between the member's 10th and 13th birthdays.

HPV: Document all doses of human papillomavirus given between their 9th and 13th birthday.

Helpful Hints

- All immunizations **MUST** be given by the child's 13th birthday.
- Use the appropriate CVX or CPT codes. Be sure to send all information to State Immunet

Lead Screening for Children (Maryland Specification)

Description

Members turning one (1) year old in the calendar year must be tested

Helpful Hints

- Any member born in 2020 **MUST** be tested in 2021
- Testing can begin at 9 months of age.

| CPT Code |
|----------|
| 83655 |

Postpartum and Prenatal Care (PPC)

Description

Women who had a live birth(s) between October 8, 2020 and October 7, 2021. For these women, the measure assesses:

- **Timeliness of Prenatal Care:** Deliveries that received a prenatal care visit in the first trimester **OR** within 42 days of enrollment in the organization.
- **Postpartum Care:** Deliveries that had a postpartum visit on or between 7 days and 84 days after delivery

Helpful Hints

- Prenatal visits-OB history/prenatal risk assessment obtained by an RN that is cosigned by OB/GYN or PCP are eligible for prenatal care visit
- Postpartum visit- Stress importance of post-partum visits during prenatal care

| Postpartum Care | |
|-----------------|----------------------------|
| CPT II | 0503F |
| CPT | 57170, 58300, 59430, 99501 |

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Well Child Visits the first 30 months of life (W30)

Description

All data are collected through admin data/claims only.

- Members who turned 15 months old during the measurement year and had six (6) or more comprehensive well-child visits with a PCP during their first 15 months of life.
- Members who turned 30 months old during the measurement year and had at least two (2) or more comprehensive well-child visits with a PCP between 15 months and 1 day to 30 months of life.

Helpful Hints

- This measure is now administrative ONLY—submit claims timely with appropriate codes that reflect age-appropriate well care service rendered
- Consider sick visits as an opportunity to catch patients up on their annual well care as appropriate
- Visits must be with a primary care practitioner
- PCP does not have to be the practitioner assigned to the child

| CPT Codes | |
|-----------|--|
| 99381 | Preventive visit new patient age: <1 year |
| 99382 | Preventive visit new patient age: 1 to 4 years |
| 99391 | Preventive visit established patient age: <1 year |
| 99392 | Preventive visit established patient age: 1 to 4 years |

Well Child Visit (WCV)

Description

Members 3-21 years of age who had at least one comprehensive well-visit with a PCP or an OB/GYN practitioner during the measurement year.

Helpful Hints

- This measure is now administrative ONLY—submit claims timely with appropriate codes that reflect age-appropriate well care services rendered
- Consider sick visits as an opportunity to catch patients up on their annual well care as appropriate
- Visits must be with a primary care practitioner. The PCP does not have to be the practitioner assigned to the child

| CPT Codes | |
|-----------|--|
| 99382 | Preventive visit new patient age: 1 to 4 years |
| 99383 | Preventive visit new patient age: 5 to 11 years |
| 99384 | Preventive visit new patient age: 12 to 17 years |
| 99385 | Preventive visit new patient age: 18 to 39 years |
| 99392 | Preventive visit established patient age: 1 to 4 years |
| 99393 | Preventive visit established patient age: 5 to 11 years |
| 99394 | Preventive visit established patient age: 12 to 17 years |
| 99395 | Preventive visit established patient age: 18 to 39 years |

Weight Counseling for Children (WCC)

Description

Members 3–17 years of age who had an outpatient visit with a PCP or OB/GYN and evidence of the following during the measurement year:

- BMI percentile documentation
- Counseling for nutrition
- Counseling for physical activity

Helpful Hints

- Anticipatory guidance regarding diet, nutrition and physical activity are valid for the WCC measure counseling elements whether given at a sick or well visit
- Ensure BMI is either plotted on a growth chart or documented as a percentile at well and sick visits.
- Services rendered during a telephone visit, e-visit or virtual check-in meet criteria for the Counseling for Nutrition and Counseling for Physical Activity indicators.
- Nutrition and physical activity counseling provided during a sick visit is eligible.

| CPT and ICD-10 Codes | |
|------------------------------|------------------------|
| BMI Percentile | ICD-10 - Z68.51-Z68.54 |
| Nutritional Counseling | CPT 97802-97804, Z71.3 |
| Physical Activity Counseling | ICD-10 - Z02.5, Z71.82 |