



IMPROVING HEALTH CARE QUALITY

Tips for Medicaid Providers

Healthcare Effectiveness Data and Information Set (HEDIS®) Quick Reference Guide Measurement Year (MY) 2022

Quality improvement measures help ensure our members receive appropriate care. We created this guide with coding tips* to help you satisfy HEDIS measures from the National Committee for Quality Assurance (NCQA). Visit the Blue Cross and Blue Shield of Texas (BCBSTX) [Quality Improvement web page](#) for more details and tip sheets.

Child and Adolescent Measures

Well-Child Visits in the First 30 Months of Life (W30): Age 0-30 Months

This measure tracks the percentage of children who:

- Have six or more well visits in the first 15 months of life, **and/or**
- Have two or more well visits between 15 and 30 months of life

Telehealth services are now approved for this measure.

Current Procedural Terminology (CPT®): 99381-99385
New patient preventive medicine services

CPT: 99391-99395 Established patient preventive medicine services

Healthcare Common Procedure Coding System (HCPCS):
G0438, G0439, S0302

International Classification of Diseases (ICD-10): Z00.110,
Z00.111, Z00.121, Z00.129, Z00.2, Z76.1, Z76.2



Childhood Immunization Status (CIS) Combination 10: Age 0-2 Years

This measure tracks the percentage of children who:

- **Complete between birth and the 2nd birthday:** three doses hepatitis B (Hep B)
- **Complete before the 2nd birthday but not prior to 42 days after birth:** four diphtheria, tetanus and acellular pertussis (DTaP), three polio (IPV), three haemophilus influenza type B (HiB), four pneumococcal (PCV), two or three rotavirus (RV)
- **Complete between the 1st and 2nd birthday:** one measles (if unspecified, three doses required), mumps and rubella (MMR), one varicella (VZV), one hepatitis A (Hep A)
- **Complete before the 2nd birthday but not prior to 6 months (180 days) after birth:** two influenza (flu) vaccines

CPT

DTaP: 90697, 90698, 90700, 90723

Flu: 90655, 90657, 90661, 90673, 90685, 90686, 90687, 90688, 90689

Hep A: 90633

Hep B: 90697, 90723, 90740, 90744, 90747, 90748

HiB: 90647, 90648, 90697, 90698 (combo DTaP-IPV/HiB), (combo HepB/HiB, 90644 (combo meningococcal C/Y-HiBPRP

IPV: 90697, 90698, 90713, 90723

Measles: 90705

Measles/Rubella: 90708

MMR: 90707, 90710

Mumps: 90704

PCV: 90670, 90671, 90677

Rubella: 90706

RV: 90681 (2 doses, 90680 (3 doses

VZV: 90710, 90716

HCPCS: G0008 (flu), G0009 (PCV), G0010 (HepB)

Immunizations for Adolescents (IMA) Combination 2: Age 9-13 Years

This measure tracks the percentage of adolescents who:

- **Complete between the 9th and 13th birthday:** two or three human papillomavirus (HPV) vaccines.
 - If the first and second doses are given less than 146 days apart, a third dose must be given to complete the series.
- **Complete between the 10th and 13th birthday:** one tetanus, diphtheria and pertussis (Tdap).
- **Complete between the 11th and 13th birthday:** one meningococcal (serogroups A, C, W and Y).

CPT

HPV: 90649, 90650 (3 doses), 90651

Meningococcal: 90619, 90733, 90734

Tdap: 90715

Child and Adolescent Well-Care Visits (WCV): Age 3-21 Years

This measure tracks the percentage of children and adolescents who had at least one comprehensive well-care visit with a primary care physician (PCP) or OB/GYN during the measurement year.

Telehealth services are now approved for this measure.

CPT: 99381-99385 New patient preventive medicine service

CPT: 99391-99395 Established patient preventive medicine services

HCPCS: G0438, G0439, S0302, S0610, S0612, S0613

ICD-10: Z00.00, Z00.01, Z00.121, Z00.129, Z00.2, Z00.3, Z01.411, Z01.419, Z02.5, Z76.1, Z76.2

Appropriate Treatment for Upper Respiratory Infection (URI): Age 3 Months and Older

This measure tracks the percentage of members who were diagnosed with URI and were not dispensed an antibiotic prescription.

Required documentation: Competing diagnosis

If you are prescribing an antibiotic for a child who has been diagnosed with a URI and has a competing diagnosis, document the proper diagnosis code on the claim. This ensures you aren't inappropriately counted as prescribing an antibiotic for a URI.

ICD-10: J06.9



Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC): Age 3-17 Years

This measure tracks the percentage of children or adolescents who had a visit with a physical exam done by PCP or OB/GYN and had evidence of the following during the measurement year:

- **Body mass index (BMI) percentile:** Member-reported biometric values (height, weight, BMI percentile) are acceptable if the PCP collects the information while taking a member's history. The information must be recorded, dated, and maintained in the member's health record.
- **Counseling for nutrition:** Services provided face-to-face or during a telephone visit, e-visit or virtual check-in meet the criteria.
- **Counseling for physical activity:** Services provided face-to-face or during a telephone visit, e-visit or virtual check-in meet the criteria.

"BMI percentile, counseling for nutrition, and counseling for physical activity can be performed and documented by any provider type, in any setting, and in any medical record."

BMI

ICD-10: Z68.51, Z68.52, Z68.53, Z68.54

Counseling for Nutrition

CPT: 97802-97804 Medical nutrition therapy

HCPCS: G0270, G0271, G0447, S9449, S9452, S9470

ICD-10: Z71.3

Counseling for Physical Activity

ICD-10: Z02.5, Z71.82

HCPCS: G0447, S9451

Prenatal and Postpartum Measures

Prenatal and Postpartum Care (PPC)

This measure tracks:

- **Timeliness of prenatal care:** a prenatal visit with a PCP or OB/GYN in the first trimester or within 42 days of enrollment in the health plan.
 - **Required documentation:** The minimum requirement is the diagnosis of pregnancy.
- **Postpartum care:** a postpartum visit with a PCP or OB/GYN on or between seven and 84 days after delivery
 - **Required documentation:** The minimum requirement is the notation of postpartum care.

Telehealth services are now approved for this measure.

Note: Please include appropriate ICD-10 codes.

Prenatal Care

CPT: 99201-99205 New patient office or other outpatient services

CPT: 99211-99215 Established patient office or other outpatient services

CPT: 99241-99245 New or established patient office or other outpatient consultation

HCPCS: T1015 (FQHC), G0463

Telephone Visits: 98966, 98967, 98968, 99441, 99442, 99443

Stand-Alone Prenatal Visits

CPT: 99500

CPT II: 0500F, 0501F, 0502F

HCPCS: H1000-H1004

Prenatal Bundled Services

CPT: 59400, 59425, 59426, 59510, 59610, 59618

HCPCS: H1005

Postpartum Care

CPT: 57170, 58300, 59430, 99501

CPT II: 0503F

HCPCS: G0101

ICD-10: Z01.411, Z01.419, Z01.42, Z30.430, Z39.1, Z39.2

Postpartum Bundled Services

CPT: 59400, 59410, 59510, 59515, 59610, 59614, 59618, 59622



Adult Measures

Controlling High Blood Pressure (CBP): Age 18-85 Years

This measure tracks blood pressure control with diabetes (type 1 and type 2) for members whose blood pressure BP was adequately controlled (<140/90 mm Hg) during the measurement year and had the following:

- **BP controlled at 139/89 mmHg or less:** The last BP reading in MY 2022 will be used; Telehealth including telephone visits, e-visits and virtual check-ins are appropriate settings for BP readings taken by any digital device.

Hypertension Diagnosis

ICD-10: I10 Essential hypertension

BP Reading, CPT II

3074F (systolic <130 mmHg)
3075F (systolic 130-139 mmHg)
3077F (systolic ≥140 mmHg)
3078F (diastolic <80 mmHg)
3079F (diastolic 80-89 mmHg)
3080F (diastolic ≥90 mmHg)

Telephone Visits

CPT: 98966-98968, 99441-99943

Kidney Health Evaluation for Patients with Diabetes* (KED): Age 18-85 Years

This measure tracks members with diabetes (type 1 and type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR) and a urine-albumin creatinine ratio (uACR).

Note: At least one uACR requires both a quantitative urine albumin test and a urine creatinine test with service dates four or less days apart during the measurement year.

* Measure previously titled Comprehensive Diabetes Care — Nephropathy

Note: Please include appropriate ICD-10 codes.

eGFR Tests

CPT: 80047, 80048, 80050, 80053, 80069, 82565

Quantitative Urine-Albumin Test

CPT: 82043

Urine Creatinine

CPT: 82570

Comprehensive Diabetes Care (CDC): Age 18-75 Years

The Comprehensive CDC measure was retired in State Fiscal Year (SFY) 2022, please see new Diabetes measures below:

- **Blood Pressure with Diabetes (BPD): Age 18-75 Years**
- **Eye Exam with Diabetes (EED): Age 18-75 Years**
- **Hemoglobin A1c Control with Diabetes (HBD): Age 18-75 Years**

Blood Pressure with Diabetes (BPD): Age 18-75 Years

This measure tracks blood pressure control with diabetes (type 1 and type 2) for members whose blood pressure BP was adequately controlled (<140/90 mm Hg) during the measurement year and had the following:

- **BP controlled at 139/89 mmHg or less:** The last BP reading in MY 2022 will be used; Telehealth including telephone visits, e-visits and virtual check-ins are appropriate settings for BP readings taken by any digital device.

BP Reading, CPT II

3074F (systolic <130 mmHg)
3075F (systolic 130-139 mmHg)
3077F (systolic ≥140 mmHg)
3078F (diastolic <80 mmHg)
3079F (diastolic 80-89 mmHg)
3080F (diastolic ≥90 mmHg)

Eye Exam with Diabetes (EED): Age 18-75 Years

This measure tracks eye exams with diabetes (type 1 and type 2) for members who had a retinal eye exam during the measurement year and had each of the following:

- **Retinal eye exam by an eye care professional** in 2022 or a “negative for retinopathy” result in 2021

Retinal Screening

CPT: 67028, 67030, 67031, 67036, 67039-67043, 67101, 67105, 67107, 67108, 67110, 67713, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228, 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92201, 92202, 92225-92228, 92230, 92235, 92240, 92250, 92260, 92203-99205, 99213-99215, 99242-99245

CPT II: 2022F, 2023F, 2024F, 2025F, 2026F, 2033F, 3072F

HCPSCS: S0620, S0621, S3000



Hemoglobin A1c Control with Diabetes (HBD): Age 18-75 Years

This measure tracks Hemoglobin A1c control with diabetes (type 1 and type 2) for members whose hemoglobin A1c (HbA1c) was at the following levels during the measurement year:

- **Hemoglobin A1c:** The last A1c level in 2022 will be used

Hemoglobin A1c Tests (Lab Draw)

CPT: 83036, 83037

Hemoglobin A1c Test (Results), CPT II

3044F (<7.0%)

3051F (≥7.0% and <8.0%)

3052F (≥8.0% and ≤9.0%)

3046F (>9.0%)

*HbA1c Control (<8.0%)

*HbA1c poor control (>9.0%)

Cervical Cancer Screenings (CCS): Age 21-64 Years

This measure assesses women who were screened for cervical cancer using any of the following criteria:

- Women 21-64 years of age who had cervical cytology performed within the last 3 years.
- Women 30-64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last 5 years.
- Women 30-64 years of age who had cervical cytology/high-risk human papillomavirus (hrHPV) co-testing within the last 5 years.

Note: Please include appropriate ICD-10 codes.

CPT: 88141, 88142, 88143 88147, 88148, 88150, 88152, 88153, 88154, 88164, 88165, 88166, 88167, 88174, 88175, 87620, 87621, 87622, 87624, 87625

HCPCS: G1023, G1024, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091, G0476

Breast Cancer Screenings (BCS): Age 50-74 Years

This measure assesses women 50-74 years of age who:

- Had at least one mammogram to screen for breast cancer in the past two years.

Note: Please include appropriate ICD-10 codes.

CPT: 77055, 77056, 77057, 77061, 77062, 77063, 77065, 77066, 77067

HCPCS: G0202, G0204, G0206

ICD-9: 87.36, 87.37

ICD-10: Z12.31

*These codes are only a sample of approved codes. See the [NCQA website](#) for more information.

These materials cannot be further distributed.

Resources

- [BCBSTX Quality Improvement Tip Sheets](#)
- [BCBSTX Preventive Care Guidelines](#)
- [BCBSTX Clinical Practice Guidelines](#)
- [NCQA HEDIS Measures and Technical Resources](#)
- [Texas Health Steps for Medical Providers](#), which includes all current vaccine schedules, the [ImmTrac2](#) Texas Immunization Registry and other important guidance for treating members

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