

Quick Reference Guide

HEDIS[®] MY 2023

FOR MORE INFORMATION, VISIT WWW.NCQA.ORG



Medicaid = ●

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HEDIS® MY 2023 Quick Reference Guide

Updated to reflect NCQA HEDIS® MY 2023 Technical Specifications

Delaware First Health strives to provide quality healthcare to our membership as measured through HEDIS® quality metrics. We created the HEDIS® MY 2023 Quick Reference Guide to help you increase your practice's HEDIS® rates and address care opportunities for your patients. Please always follow the state and/or CMS billing guidance and ensure the HEDIS® codes are covered prior to submission.



What is HEDIS®?

HEDIS® (Healthcare Effectiveness Data and Information Set) is a set of standardized performance measures developed by the National Committee for Quality Assurance (NCQA) to objectively measure, report, and compare quality across health plans. NCQA develops HEDIS® measures through a committee represented by purchasers, consumers, health plans, health care providers, and policy makers.



What are the scores used for?

As state and federal governments move toward a quality-driven healthcare industry, HEDIS® rates are becoming more important for both health plans and individual providers. State purchasers of healthcare use aggregated HEDIS® rates to evaluate health insurance companies' efforts to improve preventive health outreach for members.

Physician-specific scores are also used to measure your practice's preventive care efforts. Your practice's HEDIS® score determines your rates for physician incentive programs that pay you an increased premium — for example Pay For Performance or Quality Bonus Funds.



How are rates calculated?

HEDIS® rates can be calculated in two ways: administrative data or hybrid data. Administrative data consists of claim or encounter data submitted to the health plan. Hybrid data consists of both administrative data and a sample of medical record data. Hybrid data requires review of a random sample of member medical records to abstract data for services rendered but that were not reported to the health plan through claims/encounter data. Accurate and timely claim/encounter data reduces the need for medical record review. If services are not billed or not billed accurately, they are not included in the calculation.



How can I improve my HEDIS® scores?

- ✓ Submit claim/encounter data for each and every service rendered
- ✓ Make sure that chart documentation reflects all services billed
- ✓ Bill (or report by encounter submission) for all delivered services, regardless of contract status
- ✓ Ensure that all claim/encounter data is submitted in an accurate and timely manner
- ✓ Include CPT II codes to provide additional details and reduce medical record requests
- ✓ Respond timely to medical records requests
- ✓ Submit supplemental data throughout the measurement year
- ✓ Early Engagement with Pharmacy Adherence is key – once a member loses days on a prescription, those days cannot be recovered.
- ✓ Speak with the members about any barriers to adherence.
- ✓ Consider utilizing RxEffect – a free online portal for our network providers that will prioritize your high-risk patients more efficiently. This will save on resources as it lists your patients at highest risk for non-adherence.
- ✓ If you have any questions regarding pharmacy and member barriers, please reach out to your local Provider Relations Representative for assistance.





Updates to HEDIS® Measures

(effective for calendar year 2022 and 2023)

This guide has been updated with information from the release of the HEDIS® 2023 Volume 2 Technical Specifications by NCQA and is subject to change.



Retired Measures:

- (FVA) Flu Vaccinations for Adults Ages 18–64
- Breast Cancer Screening (BCS): no longer collected administratively; only the BCS-E measure will be reported.



Revised Measures:

- (FUA) Follow-Up After Emergency Department Visit for Substance Use
- (IET) Initiation and Engagement of Substance Abuse Disorder Treatment
- (BPD) Blood Pressure Control for Patients with Diabetes
- (EED) Eye Exam for Patients with Diabetes
- (HBD) Hemoglobin A1c Control for Patients with Diabetes
- (SPD) Statin Therapy for Patients with Diabetes
- (AMR) Asthma Medication Ratio
- (PCE) Pharmacotherapy Management of COPD Exacerbation
- (BCS-E) Breast Cancer Screening
- (CCS) Cervical Cancer Screening
- (PPC) Prenatal and Postpartum Care
- (PRS-E) Prenatal Immunization Status




New Measure for Medicaid:

- (COL) Colorectal Cancer Screening





Quick Reference Guide

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For a complete list of codes, please visit the NCQA website at www.ncqa.org, or see the HEDIS value sets. Only subsets of the NCQA approved codes are listed in this document.

Adult Health

Call To Action: Please refer to the provider portal where you will find a complete list of member care gaps as applicable for the measures in this document.



(SPC) Statin Therapy for Patients with Cardiovascular Disease

Lines of Business: ● Medicaid

The percentage of males 21-75 years of age and females 40-75 years of age during the measurement year who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and met the following criteria.

The following rates are reported:

- 1 Received Statin Therapy:** Members who were dispensed at least one high-intensity or moderate-intensity statin medication during the measurement year.
- 2 Statin Adherence 80%:** Members who remained on a high-intensity or moderate intensity statin medication for at least 80% of the treatment period.

Tips:

- Review medication list during each visit with the patient.
- Discuss the importance of medication adherence with the patient.

(continued)



(SPC) Statin Therapy for Patients with Cardiovascular Disease (continued)

Lines of Business: ● Medicaid

High- and Moderate-Intensity Statin Medications		
Description	Prescription	Medication Lists
High-intensity Statin Therapy	• Atorvastatin 40-80 mg	Atorvastatin High Intensity Medications List
High-intensity Statin Therapy	• Amlodipine-atorvastatin 40-80 mg	Amlodipine Atorvastatin High Intensity Medications List
High-intensity Statin Therapy	• Rosuvastatin 20-40 mg	Rosuvastatin High Intensity Medications List
High-intensity Statin Therapy	• Simvastatin 80 mg	Simvastatin High Intensity Medications List
High-intensity Statin Therapy	• Ezetimibe-simvastatin 80 mg	Ezetimibe Simvastatin High Intensity Medications List
Moderate-intensity Statin Therapy	• Atorvastatin 10-20 mg	Atorvastatin Moderate Intensity Medications List
Moderate-intensity Statin Therapy	• Amlodipine-atorvastatin 10-20 mg	Amlodipine Atorvastatin Moderate Intensity Medications List
Moderate-intensity Statin Therapy	• Rosuvastatin 5-10 mg	Rosuvastatin Moderate Intensity Medications List
Moderate-intensity Statin Therapy	• Simvastatin 20-40 mg	Simvastatin Moderate Intensity Medications List
Moderate-intensity Statin Therapy	• Ezetimibe-simvastatin 20-40 mg	Ezetimibe Simvastatin Moderate Intensity Medication List

(SPC) Statin Therapy for Patients with Cardiovascular Disease *(continued)*

Lines of Business: ● Medicaid

High- and Moderate-Intensity Statin Medications		
Description	Prescription	Medication Lists
Moderate-intensity Statin Therapy	· Pravastatin 40-80 mg	Pravastatin Moderate Intensity Medications List
Moderate-intensity Statin Therapy	· Lovastatin 40 mg	Lovastatin Moderate Intensity Medications List
Moderate-intensity Statin Therapy	· Fluvastatin 40-80 mg	Fluvastatin Moderate Intensity Medications List
Moderate-intensity Statin Therapy	· Pitavastatin 1-4 mg	Pitavastatin Moderate Intensity Medications List

Pharmacy Adherence Measures



(DIAB) Adherence to Diabetes Medications – Measure Overview

The percentage of members 18 years and older with a diabetes medication with a Proportion of Days Covered (PDC) $\geq 80\%$.

- ✓ Higher rate indicates better performance
- ✓ 2 fills needed to index into the measure
- ✓ Targeted early in the year

RY25 Measure Weight: 3

Gap Closure Requirements

PDC $\geq 80\%$ per member

- ✓ PDC calculated utilizing: total days supplied of diabetes pharmacy claims / Date of first diabetes fill to the end of the reporting interval
- ✓ Each medication claim must be submitted to the Health Plan (cash payment/ samples given by prescriber or meds filled at an out of network pharmacy do not count)
- ✓ Final plan star score based upon the percentage of members with a PDC $\geq 80\%$

Other Criteria

- ✓ Medication Inclusions: Diabetes Medications
 - i.e., Metformin, Glipizide, Glimepiride, Januvia
- ✓ Exclusions: Members with an insulin claim; Hospice enrollees, ESRD





(RASA) Adherence to Hypertensive Medications – Measure Overview

The percentage of members 18 years and older with a RASA medication with a Proportion of Days Covered (PDC) \geq 80%.

- ✓ Higher rate indicates better performance
- ✓ 2 fills needed to index into the measure
- ✓ Targeted early in the year

RY25 Measure Weight: 3

Gap Closure Requirements

PDC \geq 80% per member

- ✓ PDC calculated utilizing: total days supplied of RASA pharmacy claims / Date of first RASA fill to the end of the reporting interval
- ✓ Each medication claim must be submitted to the Health Plan (cash payment/ samples given by prescriber or meds filled at an out of network pharmacy do not count)
- ✓ Final plan star score based upon the percentage of members with a PDC \geq 80%

Other Criteria

- ✓ Medication Inclusions: RASA Medications
 - i.e. Lisinopril, Losartan, Enalapril, Valsartan
- ✓ Exclusions: Members with a Sacubutril/valsartan claim; Hospice enrollees, ESRD



(STAT) Adherence to Cholesterol Medications – Measure Overview

The percentage of members 18 years and older with a CHOL medication with a Proportion of Days Covered (PDC) \geq 80%.

- ✓ Higher rate indicates better performance
- ✓ 2 fills needed to index into the measure
- ✓ Targeted early in the year

RY25 Measure Weight: 3

Gap Closure Requirements

PDC \geq 80% per member

- ✓ **PDC calculated utilizing:**
total days supplied of CHOL pharmacy claims / Date of first CHOL fill to the end of the reporting interval
- ✓ Each medication claim must be submitted to the Health Plan (cash payment/ samples given by prescriber or meds filled at an out of network pharmacy do not count)
- ✓ Final plan star score based upon the percentage of members with a PDC \geq 80%

Other Criteria

- ✓ Medication Inclusions: CHOL Medications
 - i.e., Atorvastatin, Simvastatin, Rosuvastatin, Pravastatin
- ✓ Exclusions: Hospice enrollees, ESRD



(SUPD) Statin Use in Persons with Diabetes – Measure Overview

The percentage of members ages 40-75 years of age with diabetes that have a single fill of a statin.

- ✓ Higher rate indicates better performance
- ✓ Only 1 fill needed to index in the measure
- ✓ Targeted later in the year vs. other measures (starting in late July or August)

RY25 Measure Weight: 1

Gap Closure Requirements

Member received a Statin Therapy

- ✓ The number of members who had at least one dispensing event for a statin medication during the measurement year

Other Criteria

- ✓ Medication Inclusions: Statin Medications
 - i.e., Atorvastatin, Simvastatin, Rosuvastatin, Pravastatin
- ✓ Exclusions: ESRD, Rhabdomyolysis, Pregnancy, Cirrhosis, Pre-Diabetes, Polycystic Ovary Syndrome

Pediatric Health



(URI) Appropriate Treatment for Upper Respiratory Infection

Lines of Business: ● Medicaid

The percentage of episodes for members 3 months of age and older with a diagnosis of upper respiratory infection (URI) that did not result in an antibiotic dispensing event.

Tips:

- Discourage the use of antibiotics for routine treatment of uncomplicated acute bronchitis, unless clinically indicated.
- Submit applicable codes.

Description	Codes*
Acute Nasopharyngitis (common cold)	ICD-10: J00
Acute Laryngopharyngitis	ICD-10: J06.0
Acute Upper Respiratory Infection, unspecified	ICD-10: J06.9

*Codes subject to change



Social Determinants of Health



(SDOH) Social Determinants of Health

Description	Codes*
Occupational Exposure to Risk Factors	ICD-10: Z57.0 - Z57.9
Problems Related to Education and Literacy	ICD-10: Z55.0 - Z55.9
Problems Related to Employment and Unemployment	ICD-10: Z56.0 - Z56.9
Problems Related to Physical Environment	ICD-10: Z58.0 - Z58.9
Problems Related to Housing and Economic Circumstances	ICD-10: Z59.0 - Z59.9
Problems Related to Social Environment	ICD-10: Z60.0 - Z60.9
Problems Related to Upbringing	ICD-10: Z62.0 - Z62.9
Problems Related to Primary Support Group, Including Family Circumstances	ICD-10: Z63.0 - Z63.9
Problems Related to Certain Psychosocial Circumstances	ICD-10: Z64.0 - Z64.4
Problems Related to Other Psychosocial Circumstances	ICD-10: Z65.0 - Z65.9
Problems Related to Substance Use	ICD-10: Z71.41, Z71.42, Z71.51, Z71.52
Problems Related to Sleep/Sleep Hygiene	ICD-10: Z72.820, Z72.821
Other Risk Factors	ICD-10: Z91.89
Patient/Caregiver Noncompliance with Dietary Regimen or Medical Treatment Due to Financial Hardship	ICD-10: Z911.10, Z911.90, Z91A.10, Z91A.20

(continued)



(SDOH) Social Determinants of Health *(continued)*

Description	Codes*
Transportation Insecurity Procedures	CPT: 96156
CPT/HCPCS Screening Codes Applicable to SDOH	CPT: 96156-96161, 97802-97804, 99377-99378 HCPCS: S5170, S9470, G0182, G9473-G9479, Q5003-Q5008, Q5010, S9126, T2042-T2046

*Codes subject to change

Best Practices Include supplemental codes in the patient’s diagnosis section on a claim form. Assign as many SDOH codes necessary to describe all the social problems, conditions, or risk factors documented during the current episode of care.

Behavioral Health



(APP) Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics

Applicable Foster Care Measure:

Lines of Business: ● Medicaid

Measure evaluates the percentage of children and adolescents 1-17 years of age who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment.

CPT® Codes for Psychosocial Care

90832 - 90834, 90836 - 90840, 90845 - 90847, 90849, 90853, 90875, 90876, 90880

HCPCS Codes for Psychological Care

G0176, G0177, G0409 - G0411, H0004, H0035 - H0040, H2000, H2001, H2011 - H2014, H2017 - H2020, S0201, S9480, S9484, S9485

With or without a telehealth modifier: 95, GT

*Codes subject to change





(COU) Risk of Continued Opioid Use

Lines of Business: ● Medicaid

Measure evaluates the percentage of members 18 years of age and older who have a new episode of opioid use that puts them at risk for continued opioid use.

Two rates are reported:

- 1 The percentage of members with at least 15 days of prescription opioids in a 30-day period.
- 2 The percentage of members with at least 31 days of prescription opioids in a 62-day period.

Note: A lower rate indicates better performance.

Opioid Medications

- | | | |
|---|-----------------|---------------|
| • Benzhydrocodone | • Fentanyl | • Morphine |
| • Buprenorphine (transdermal patch and buccal film) | • Hydrocodone | • Opium |
| • Butorphanol | • Hydromorphone | • Oxycodone |
| • Codeine | • Levorphanol | • Pentazocine |
| • Dihydrocodeine | • Meperidine | • Tapentadol |
| | • Methadone | • Tramadol |



(FUA) Follow-Up After Emergency Department Visit with Substance Use Disorder

Lines of Business: ● Medicaid

Measure evaluates the percentage of emergency department (ED) visits among members age 13 years and older with a principal diagnosis of substance use disorder (SUD), or any diagnosis of drug overdose.

Two rates are reported:

- 1** Discharges for which the member received follow-up within 30 days of discharge
- 2** Discharges for which the member received follow-up within 7 days of discharge

The visit can be with any practitioner if the claim includes a diagnosis of SUD (F10.xx-F19.xx) or drug overdose (e.g.T40-T43, T51). If the visit occurs with a mental health provider, the claim does not have to include the SUD or drug overdose diagnosis.

(FUA) Follow-Up After Emergency Department Visit with Substance Use Disorder *(continued)*

Lines of Business: ● Medicaid

Description	Codes*
Outpatient Visit with any Diagnosis of SUD or Drug Overdose	<p>CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 98960-98962, 99078, 99201-99205, 99211- 99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 994883, 99492-99494, 99510</p> <p>HCPCS: G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H2000, H2010, H2013, H2015, H2017-H2020, T1015</p> <p>ICD-10: F10.xx-F19.xx or T40. xxxx-T43.xxxx, T51.xxxx</p> <p>POS: 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 71-72</p>
Intensive Outpatient Encounter or Partial Hospitalization with any Diagnosis of SUD or Drug Overdose	<p>CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255</p> <p>HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485</p> <p>ICD-10: F10.xx-F19.xx or T40. xxxx-T43.xxxx, T51.xxxx</p> <p>POS: 52</p>

(FUA) Follow-Up After Emergency Department Visit
with Substance Use Disorder *(continued)*

Lines of Business: ● Medicaid

Description	Codes*
Non-residential Substance Abuse Treatment Facility with any Diagnosis of SUD or Drug Overdose	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 ICD-10: F10.xx-F19.xx or T40. xxxx-T43.xxxx, T51.xxxx POS: 57, 58
Community Mental Health Center Visit with any Diagnosis of SUD or Drug Overdose	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 ICD-10: F10.xx-F19.xx or T40. xxxx-T43.xxxx, T51.xxxx POS: 53
Observation Visit with any Diagnosis of SUD or Drug Overdose	CPT: 99217, 99218, 99219, 99220 ICD-10: F10.xx-F19.xx or T40. xxxx-T43.xxxx, T51.xxxx
Peer Support Service with any Diagnosis of SUD or Drug Overdose	HCPCS: G0177, H0024, H0025, H0038-H0040, H0046, H2014, H2023, S9445, T1012, T1016 ICD-10: F10.xx-F19.xx or T40. xxxx-T43.xxxx, T51.xxxx
Opioid Treatment Service That Bills Monthly or Weekly with any Diagnosis of SUD or Drug Overdose	HCPCS: G2086, G2087, G2071, G8074-G2077, G2080 ICD-10: F10.xx-F19.xx or T40. xxxx-T43.xxxx, T51.xxxx

(FUA) Follow-Up After Emergency Department Visit with Substance Use Disorder *(continued)*

Lines of Business: ● Medicaid

Description	Codes*
Telehealth Visit with any Diagnosis of SUD or Drug Overdose	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 ICD-10: F10.xx-F19.xx or T40. xxxx-T43.xxxx, T51.xxxx POS: : 02, 10
Telephone Visit with any Diagnosis of SUD or Drug Overdose	CPT: 98966-98968, 99441-99443 ICD-10: F10.xx-F19.xx or T40. xxxx-T43.xxxx, T51.xxxx
E-Visit or Virtual Check In with any Diagnosis of SUD or Drug Overdose	CPT: 98969-98972, 99421-99444, 99457, 99458 HCPCS: G0071, G2010, G2012, G2061-G2063, G2250-G2252
Substance Use and Substance Use Disorder Services	CPT: 99408, 99409 HCPCS: T1012, G0396, G0397, H0001, H0005, H0015, H0016, H0022, H0047, H0050, H2035, H2036, T1006, H0006, H0028
Behavioral Health Screening or Assessment for SUD or Mental Health Disorders	CPT: 99408, 99409 HCPCS: G0396, G0397, G0442, H2011, H0001, H0002, H0031, H0049
Pharmacotherapy Dispensing Event or Medication Treatment Event	Medications: Disulfiram (oral), Naltrexone (oral and injectable), Acamprosate (oral; delayed-release tablet), Buprenorphine (implant, injection, or sublingual tablet), Buprenorphine/naloxone (sublingual tablet, buccal film, sublingual film) HCPCS: G2069, G2070, G2072, G2073, H0020, H0033, J0570-J0575, J2315, Q9991, Q9992, S0109



(FUI) Follow-Up After High-Intensity Care for Substance Use Disorder

Lines of Business: ● Medicaid

Measure evaluates percentage of acute inpatient hospitalizations, residential treatment or withdrawal management visits for a diagnosis of substance use disorder among members 13 years of age and older that result in a follow-up visit or service for substance use disorder.

Two rates are reported:

- 1 The percentage of visits or discharges for which the member received follow-up for substance use disorder within the 30 days after the visit or discharge.
- 2 The percentage of visits or discharges for which the member received follow-up for substance use disorder within the 7 days after the visit or discharge.

Note: Follow-up does not include withdrawal management.

Description	Codes*
An Acute or Nonacute Inpatient Admission or Residential Behavioral Health Stay with a Principal Diagnosis of SUD on the Discharge Claim	F10.xx-F19.xx

(FUI) Follow-Up After High-Intensity Care for
Substance Use Disorder (continued)

Lines of Business: ● Medicaid

Description	Codes*
Outpatient Visit with a Principal Diagnosis of SUD	<p>CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 98960-98962, 99078, 99201-99205, 99211- 99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 994883, 99492</p> <p>HCPCS: G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H2000, H2010, H2013, H2015, H2017-H2020, T1015</p> <p>ICD-10: F10.xx-F19.xx</p> <p>POS: 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 71-72</p>
Intensive Outpatient Encounter or Partial Hospitalization with a Principal Diagnosis of SUD	<p>CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255</p> <p>HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485</p> <p>ICD-10: F10.xx-F19.xx</p> <p>POS: 52</p>

(FUI) Follow-Up After High-Intensity Care for Substance Use Disorder *(continued)*

Lines of Business: ● Medicaid

Description	Codes*
Non-residential Substance Abuse Treatment Facility with a Principal Diagnosis of SUD	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 ICD-10: F10.xx-F19.xx POS: 57, 58
Community Mental Health Center Visit with a Principal Diagnosis of SUD	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 ICD-10: F10.xx-F19.xx POS: 53
Telehealth Visit with a Principal Diagnosis of SUD	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 ICD-10: F10.xx-F19.xx POS: 02, 10
Substance use Disorder Services with a Principal Diagnosis of SUD	CPT: 99408, 99409 HCPCS: : T1012, G0396, G0397, H0001, H0005, H0015, H0016, H0022, H0047, H0050, H2035, H2036, T1006, H0006, H0028
Opioid Treatment Service that Bills Monthly or Weekly with a Principal Diagnosis of SUD	HCPCS: G2086, G2087, G2071, G8074-G2077, G2080 ICD-10: F10.xx-F19.xx
Observation Visit with a Principal Diagnosis of SUD	CPT: 99217, 99218, 99219, 99220 ICD-10: F10.xx-F19.xx

(FUI) Follow-Up After High-Intensity Care for Substance Use Disorder *(continued)*

Lines of Business: ● Medicaid

Description	Codes*
Residential Behavioral Health Treatment with a Principal Diagnosis of SUD	HCPCS: H0017, H0018, H0019, T2048 ICD-10: F10.xx-F19.xx
Telephone Visit with a Principal Diagnosis of SUD	CPT: 98966-98968, 99441-99443 ICD-10: F10.xx-F19.xx
E-Visit or Virtual Check in with a Principal Diagnosis of SUD	CPT: 98969-98972, 99421-99444, 99457, 99458 HCPCS: G0071, G2010, G2012, G2061-G2063, G2250-G2252
Pharmacotherapy Dispensing Event or Medication Treatment Event	Medications: Disulfiram (oral), Naltrexone (oral and injectable), Acamprosate (oral; delayed-release tablet), Buprenorphine (implant, injection, or sublingual tablet), Buprenorphine/naloxone (sublingual tablet, buccal film, sublingual film) HCPCS: G2069, G2070, G2072, G2073, H0020, H0033, J0570-J0575, J2315, Q9991, Q9992, S0109

*Codes subject to change



(FUM) Follow-Up After Emergency Department Visit for Mental Illness

Applicable Foster Care Measure:

Lines of Business: ● Medicaid

Measure evaluates the percentage of emergency department (ED) visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness.

Two rates are reported:

- 1 The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days).
- 2 The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).

Description	Codes*
Outpatient Visit with a Principal Diagnosis of a Mental Health Disorder	<p>CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 98960-98962, 99078, 99201-99205, 99211- 99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 994883, 99492</p> <p>HCPCS: G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H2000, H2010, H2013, H2015, H2017-H2020, T1015</p> <p>ICD-10: F10.xx-F99</p> <p>POS: 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 71-72</p>

(FUM) Follow-Up After Emergency Department Visit for Mental Illness *(continued)*

Lines of Business: ● Medicaid

Description	Codes*
Intensive Outpatient Encounter or Partial Hospitalization with a Principal Diagnosis of a Mental Health Disorder	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485 ICD-10: F10.xx-F99 POS: 52
Community Mental Health Center Visit with a Principal Diagnosis of a Mental Health Disorder	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 ICD-10: F10.xx-F99 POS: 53
Electroconvulsive Therapy with a Principal Diagnosis of a Mental Health Disorder	CPT: 90780 POS: 03, 05, 07, 09, 11- 20, 22, 24, 33, 49, 50, 52, 53, 71, 72
Telehealth Visit with a Principal Diagnosis of a Mental Health Disorder	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 ICD-10: F10.xx-F99 POS: 02, 10
Observation Visit with a Principal Diagnosis of a Mental Health Disorder	CPT: 99217, 99218, 99219, 99220 ICD-10: F10.xx-F99
Telephone Visit with a Principal Diagnosis of a Mental Health Disorder	CPT: 98966-98968, 99441-99443 ICD-10: F10.xx-F99

(FUM) Follow-Up After Emergency Department Visit for Mental Illness *(continued)*

Lines of Business: ● Medicaid

Description	Codes*
E-Visit or Virtual Check in with a Principal Diagnosis of a Mental Health Disorder	CPT: 98969-98972, 99421-99444, 99457, 99458 HCPCS: G0071, G2010, G2012, G2061-G2063, G2250-G2252
An Outpatient with a Principal Diagnosis of Intentional Self-Harm with any Diagnosis of a Mental Health Disorder	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 98960-98962, 99078, 99201-99205, 99211- 99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 994883, 99492 HCPCS: G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H2000, H2010, H2013, H2015, H2017-H2020, T1015 ICD-10: T40.xxxx-T43.xxxx, T51.xxxx with F10.xx-F99 POS: 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 71-72
Intensive Outpatient Encounter or Partial Hospitalization with a Principal Diagnosis of Intentional Self-harm with any Diagnosis of a Mental Health Disorder	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485 ICD-10: T40.xxxx-T43.xxxx, T51.xxxx with F10.xx-F99 POS: 52

(FUM) Follow-Up After Emergency Department Visit for Mental Illness *(continued)*

Lines of Business: ● Medicaid

Description	Codes*
Community Mental Health Center Visit with a Principal Diagnosis of Intentional Self-harm with any Diagnosis of a Mental Health Disorder	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 ICD-10: T40.xxxx-T43.xxxx, T51.xxxx with F10.xx-F99 POS: 53
Electroconvulsive Therapy with a Principal Diagnosis of Intentional Self-harm with any Diagnosis of a Mental Health Disorder	CPT: 90780 ICD-10: T40.xxxx-T43.xxxx, T51.xxxx with F10.xx-F99 POS: 03, 05, 07, 09, 11- 20, 22, 24, 33, 49, 50, 52, 53, 71, 72
Telehealth Visit with a Principal Diagnosis of Intentional Self-harm with any Diagnosis of a Mental Health Disorder	CPT: 90791, 90792, 90832, 90833, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 ICD-10: T40.xxxx-T43.xxxx, T51.xxxx with F10.xx-F99 POS: 02, 10
Observation Visit with a Principal Diagnosis of Intentional Self-harm with any Diagnosis of a Mental Health Disorder	CPT: 99217, 99218, 99219, 99220 ICD-10: T40.xxxx-T43.xxxx, T51.xxxx with F10.xx-F99
Telephone Visit with a Principal Diagnosis of Intentional Self-harm with any Diagnosis of a Mental Health Disorder	CPT: 98966-98968, 99441-99443 ICD-10: T40.xxxx-T43.xxxx, T51.xxxx with F10.xx-F99

(FUM) Follow-Up After Emergency Department Visit
for Mental Illness *(continued)*

Lines of Business: ● Medicaid

Description	Codes*
E-Visit or Virtual Check In with a Principal Diagnosis of Intentional Self-harm with any Diagnosis of a Mental Health Disorder	CPT: 98969-98972, 99421-99444, 99457, 99458 HCPCS: G0071, G2010, G2012, G2061-G2063, G2250-G2252 ICD-10: T40.xxxx-T43.xxxx, T51.xxxx with F10.xx-F99



(PND-E) Prenatal Depression Screening and Follow-Up

Lines of Business: ● Medicaid

Evaluates the percentage of deliveries in which members were screened for clinical depression while pregnant and, if screened positive, received follow-up care.

- 1 Depression Screening. The percentage of deliveries in which members were screened for clinical depression during pregnancy using a standardized instrument.
- 2 Follow-Up on Positive Screen. The percentage of deliveries in which members received follow-up care within 30 days of a positive depression screen finding.

Instruments for Adolescents (≤17 years)	Positive Finding
Patient Health Questionnaire (PHQ-9) [®]	Total score ≥10
Patient Health Questionnaire Modified for Teens (PHQ- 9M) [®]	Total score ≥10
Patient Health Questionnaire-2 (PHQ-2) ^{®1}	Total score ≥3
Beck Depression Inventory-Fast Screen (BDI-FS) ^{®1,2}	Total score ≥8
Center for Epidemiologic Studies Depression Scale- Revised (CESD-R)	Total score ≥17
Edinburgh Postnatal Depression Scale (EPDS)	Total score ≥10
PROMIS Depression	Total score (T Score) ≥60

(PND-E) Prenatal Depression Screening
and Follow-Up *(continued)*

Lines of Business: ● Medicaid

Instruments for Adults (18+ years)	Positive Finding
Patient Health Questionnaire (PHQ-9) [®]	Total score ≥10
Patient Health Questionnaire-2 (PHQ-2) ^{®1}	Total score ≥3
Beck Depression Inventory-Fast Screen (BDI-FS) ^{®1,2}	Total score ≥8
Beck Depression Inventory (BDI-II)	Total score ≥20
Center for Epidemiologic Studies Depression Scale- Revised (CESD-R)	Total score ≥17
Duke Anxiety-Depression Scale (DUKE-AD) ^{®2}	Total score ≥30
Edinburgh Postnatal Depression Scale (EPDS)	Total score ≥10
My Mood Monitor (M-3) [®]	Total score ≥5
PROMIS Depression	Total score (T Score) ≥60
Clinically Useful Depression Outcome Scale (CUDOS)	Total score ≥31

¹Brief screening instrument. All other instruments are full-length.

²Proprietary; may be cost or licensing requirement associated with use.

(PND-E) Prenatal Depression Screening and Follow-Up *(continued)*

Lines of Business: ● Medicaid

Description	LOINC Code Used to Identify Screening Results
Beck Depression Inventory Fast Screen total score [BDI]	'89208-3' from "LOINC" display 'Beck Depression Inventory Fast Screen total score [BDI]'
Beck Depression Inventory II total score [BDI]	'89209-1' from "LOINC" display 'Beck Depression Inventory II total score [BDI]'
Center for Epidemiologic Studies Depression Scale-Revised total score [CESD-R]	'89205-9' from "LOINC" display Center for Epidemiologic Studies Depression Scale-Revised total score [CESD-R]'
Edinburgh Postnatal Depression Scale [EPDS]	'71354-5' from "LOINC" display 'Edinburgh Postnatal Depression Scale [EPDS]'
Final score [DUKE-AD]	'90853-3' from "LOINC" display 'Final score [DUKE-AD]'
Patient Health Questionnaire 2 item (PHQ-2) total score [Reported]	'55758-7' from "LOINC" display 'Patient Health Questionnaire 2 item (PHQ-2) total score [Reported]'
Patient Health Questionnaire 9 item (PHQ-9) total score [Reported]	'44261-6' from "LOINC" display 'Patient Health Questionnaire 9 item (PHQ-9) total score [Reported]'
Patient Health Questionnaire-9: Modified for Teens total score [Reported.PHQ.Teen]	'89204-2' from "LOINC" display 'Patient Health Questionnaire-9: Modified for Teens total score [Reported.PHQ.Teen]'
PROMIS-29 Depression score T-score	'71965-8' from "LOINC" display 'PROMIS-29 Depression score T-score

(PND-E) Prenatal Depression Screening and Follow-Up *(continued)*

Lines of Business: ● Medicaid

Description	LOINC Code Used to Identify Screening Results
Total score [CUDOS]	'90221-3' from "LOINC" display 'Total score [CUDOS]'
Code Total score [M3]	'71777-7' from "LOINC" display 'Total score [M3]'



(POD) Pharmacotherapy for Opioid Use Disorder

Lines of Business: ● Medicaid

Evaluates the percentage of opioid use disorder (OUD) pharmacotherapy events that lasted at least 180 days among members 16 years of age and older with a diagnosis of OUD and a new OUD pharmacotherapy event.

Description	Codes*
Opioid Use Disorder (OUD)	F11.10, F11.120-122, F11.129, F11.13-14, F11.150-151, F11.159, F11.181-182, F11.188, F11.19-20, F11.220-222, F11.229, F11.23-24, F11.250-251, F11.259, F11.281-282, F11.288, F11.29
Description	Prescription
Antagonist	Naltrexone (oral or injectable)
Partial Agonist	Buprenorphine (sublingual tablet, injection, or implant)
Partial Agonist	Buprenorphine/naloxone (sublingual tablet, buccal film, sublingual film)
Agonist	Methadone (oral, medical claim codes H0020, S10109, G2067, G2078)



(SAA) Adherence to Antipsychotic Medications for Individuals With Schizophrenia

Lines of Business: ● Medicaid

Evaluates percentage of members 18 years of age and older during the measurement year with schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period.

Oral Antipsychotics		
• Aripiprazole	• Lumateperone	• Chlorpromazine
• Asenapine	• Lurasidone	• Fluphenazine
• Brexpiprazole	• Molindone	• Perphenazine
• Cariprazine	• Olanzapine	• Prochlorperazine
• Clozapine	• Paliperidone	• Thioridazine
• Haloperidol	• Quetiapine	• Trifluoperazine
• Iloperidone	• Risperidone	• Amitriptyline-perphenazine
• Loxapine	• Ziprasidone	• Thiothixene

Long-Acting Injections	
Description	Prescription
Long-acting Injections 14 Days Supply	Risperidone (excluding Perseris®)
Long-acting Injections 28 Days Supply	<ul style="list-style-type: none">• Aripiprazole• Aripiprwarzole lauroxil• Fluphenazine decanoate• Haloperidol decanoate• Olanzapine• Paliperidone palmitate
Long-acting Injections 30 days Supply	Risperidone (Perseris®)



(SMC) Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia

Lines of Business: ● Medicaid

Measure evaluates the percentage of members 18–64 years of age with schizophrenia or schizoaffective disorder and cardiovascular disease, who had an LDL-C test during the measurement year.

Description	Codes*
LDL-C Test	80061, 83700, 83701, 83704, 83721

*Codes subject to change



(SMD) Diabetes Monitoring for People with Diabetes and Schizophrenia

Lines of Business: ● Medicaid

Measure evaluates the percentage of members 18-64 years of age with schizophrenia or schizoaffective disorder and diabetes who had both an LDL-C test and an HbA1c test.

Tips:

- Order diabetes and a cholesterol panel every year.
- Communicate and coordinate care between behavioral health and primary care providers to communicate test results.
- Educate members on the need for continuous monitoring.
- Help members with scheduling appointments.

Description	Codes*
HbA1c Lab Tests	CPT: 83036, 83037 CPT-CAT-II: 3044F, 3046F, 3051F, 3052F
LDL-C Lab Tests	CPT: 80061, 83700, 83701, 83704, 83721 CPT-CAT-II: 3048F, 3049F, 3050F

*Codes subject to change



(SSD) Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications

Lines of Business: ● Medicaid

Measure evaluates percentage of members 18-64 years of age with schizophrenia, schizoaffective disorder, or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test.

Tips:

- Provide members with HbA1c or glucose test orders to be completed yearly.
- Educate the member about the risks associated with taking antipsychotic medications and the importance of regular follow up care.
- Submit applicable codes.

Description	Codes*
HbA1c Lab Tests	CPT: 83036, 83037 CPT-CAT-II: 3044F, 3046F, 3051F, 3052F
Glucose Lab Tests	CPT: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951

*Codes subject to change



(UOP) Use of Opioids from Multiple Providers

Lines of Business: ● Medicaid

Assesses the percentage of members 18 years and older, receiving prescription opioids for ≥15 days during the measurement year, who received opioids from multiple providers.

Three rates reported:

- 1 Multiple Prescribers-** The percentage of members receiving prescriptions for opioids from four or more different prescribers during the measurement year.
- 2 Multiple Pharmacies-** The percentage of members receiving prescriptions for opioids from four or more different pharmacies during the measurement year.
- 3 Multiple Prescribers and Multiple Pharmacies-** The percentage of members receiving prescriptions for opioids from four or more different prescribers **and** four or more different pharmacies during the measurement year (i.e., the percentage of members who are numerator compliant for both the Multiple Prescribers and Multiple Pharmacies rates).

Note: A lower rate indicates better performance for all three rates.

Opioid Medications	
• Benzhydrocodone	• Meperidine
• Buprenorphine (transdermal patch and buccal film)	• Methadone
• Codeine	• Morphine
• Dihydrocodeine	• Opium
• Fentanyl	• Oxycodone
• Hydrocodone	• Oxymorphone
• Hydromorphone	• Pentazocine
• Levorphanol	• Tapentadol
	• Tramadol

(Opioid medications exclude injectables and opioid-containing cough and cold products)

***For the follow-up treatments, include an ICD-10 diagnosis for Alcohol or Other Drug Dependence from the Mental, Behavioral and Neurodevelopmental Disorder Section of ICD-10 along with a procedure code for the preventive service, evaluation, and management consultation or counseling service.**



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