

We value everything you do to deliver quality care for our members – your patients – and to make sure they have a positive healthcare experience. That’s why we’ve created this easy-to-use, informative HEDIS® At-A-Glance Guide. It gives you the tools you need to meet, document and code HEDIS® measures. Together, we can provide the care and services our members need to stay healthy and improve quality scores and Star Ratings. This supports our providers and ultimately benefits our members. Please contact your Provider Relations representative if you need more information or have any questions.

Quality care is a team effort. Thank you for playing a starring role!

HEDIS® Measure	Recommendations	Coding and Services
<p><b>Follow-Up Care for Children Prescribed ADHD Medication (ADD)</b></p> <p><b>Measure Specifications:</b> The percentage of children <u>newly</u> prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed. Two rates are reported.</p> <ol style="list-style-type: none"> <li><i>Initiation Phase.</i> The percentage of members 6–12 years of age with an ambulatory prescription dispensed for ADHD medication, who had one follow-up visit with a practitioner with prescribing authority during the 30-day Initiation Phase.</li> <li><i>Continuation and Maintenance (C&amp;M) Phase.</i> The percentage of members 6–12 years of age with an ambulatory prescription dispensed for ADHD medication, who remained on the medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least two follow-up visits</li> </ol>	<ul style="list-style-type: none"> <li>When prescribing a new ADHD medication for a patient, be sure to schedule the follow up visit within 30 days after initial appointment; and before the patient and legal guardian leave the office to assess how the medication is working and to address side effect issues.</li> <li>Schedule at least 2 visits within 9 months after the 30 day follow-up visit to monitor the patient. <u>Only one of the two visits (during days 31–300) may be an e-visit or virtual check-in.</u></li> <li>If the patients’ legal guardian cancels an appointment be sure to reschedule right away keeping in mind the measurement time periods.</li> </ul> <p>Before prescribing ADHD medication for your younger Medicaid patients, refer to the Preferred Drug List (PDL) on the state-specific health plan website.</p>	<p><u>*ICD-10 Dx:</u> Mental, Behavioral and Neurodevelopmental Disorders</p> <p><u>** CPT® Codes for Initiation, Continuation and Maintenance Phases:</u> 96150-96154, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99219, 99241-99245, 99341-99345, 99347, 99348-99350, 99381-99387, 99391-99397, 99401-99404, 99411-99412, 99483, 99510</p> <p><u>Important Reminder for Continuation and Maintenance Phases of Treatment:</u> Only one visit may be a telephone visit – represented by a telehealth modifier – or telephone visit_CPT® Codes_98966 – 68, 99441 - 99443</p>

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# HEDIS® MEASUREMENT YEAR 2021 AT-A-GLANCE

## BEHAVIORAL HEALTH MEASURES



HEDIS® Measure	Recommendations	Coding and Services
<p>with a practitioner within 270 days (9 months) after the Initiation Phase ended.</p> <p><b><u>Applicable Lines of Business:</u></b></p> <ul style="list-style-type: none"> <li>Medicaid</li> </ul> <p><b><u>Age Group included in the measure:</u></b></p> <p>6 – 12 years</p>		

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<p><b>Antidepressant Medication Management (AMM)</b></p> <p><i>*Applicable Foster Care Measure</i></p> <p><b>Measure Specifications:</b></p> <p>Members with a diagnosis of major depression and were treated with antidepressant medication, and who remained on an antidepressant medication treatment. Two rates are reported:</p> <ul style="list-style-type: none"> <li><b>Effective Acute Phase Treatment</b> – Members who remained on an antidepressant medication for at least 84 days (12 weeks).</li> <li><b>Effective Continuation Phase Treatment</b> – Members who remained on an antidepressant medication for at least 180 days (6 months).</li> </ul> <p><b>Applicable Lines of Business:</b></p> <ul style="list-style-type: none"> <li>Medicaid</li> <li>Medicare</li> <li>Marketplace</li> </ul> <p><b>Age Group included in the measure:</b> 18 years and older</p>	<p>Before diagnosing a patient with Major Depression, complete a comprehensive medical exam, including lab testing, which may identify metabolic cause of depression. Accurate diagnosis drives appropriate treatment and interventions. Rule out medical or mental disorders that can produce symptoms similar to depression.</p> <p>Manage your patients' depression with a systematic approach for accurate assessment and diagnosis. Begin with a nationally recognized tool such as the Patient Health Questionnaire (PHQ-9) using the billing code <b>96127</b> in conjunction with the ICD-10 diagnosis code Z13.</p> <p>Educating your patients is the key to medication compliance.</p> <ol style="list-style-type: none"> <li>Discuss how to take antidepressants how they work, the benefits and how long to take them.</li> <li>Tell your patients how long they can expect to be on the antidepressants before they start to feel better.</li> <li>Stress the importance of taking the medication even if they begin feeling better.</li> <li>Talk about common side effects, how long they may last and how to manage them.</li> <li>Let your patient know what to do if they have questions or concerns.</li> </ol>	<p><u>*ICD-10 Major Depression and Dysthymia Diagnosis Codes:</u></p> <p>F32.0 - F32.5; F32.9; F33.0 - F33.3; F33.40 - F33.42; F33.9; F34.1</p> <p><u>**BH Outpatient CPT® Codes:</u></p> <p>99078, 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411-99412, 99510</p> <p><u>HCPCS Codes:</u></p> <p>G0155, G0176-G0177, G0409, G0463, H0002, H0004, H0031, H0034-H0037, H0039-H0040, H2000, H2001, H2010-H2011, M0064, T1015</p> <p><u>**Telephone Visits CPT® Codes:</u></p> <p>98966-98968, 99441-99443</p> <p><u>Telephone Modifier Value Set:</u></p> <p>95 GT POS: 02</p> <p><u>UB Revenue Codes:</u></p> <p>0450-0452, 0456, 0459, 0981</p>

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	<p>6. Monitor with scheduled follow-up appointments.</p> <p>7. Consider a psychotherapy referral for your patients. This may increase the chances of staying on medication and decrease the likelihood of recurrence.</p> <p>Before prescribing antidepressant medication for your Medicaid patients, refer to the Preferred Drug List (PDL) on the state-specific health plan website.</p> <p>Before prescribing antidepressant medication for your Medicare patients refer to the Plan Formulary.</p>	

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HEDIS® Measure	Recommendations	Coding and Services
<p><b>Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)</b></p> <p><i>*Applicable Foster Care Measure</i></p> <p><b>Measure Specifications:</b> The percentage of children and adolescents 1–17 years of age who had <u>two or more antipsychotic prescriptions</u> and had metabolic testing. Three rates are reported:</p> <ol style="list-style-type: none"> <li>1. The percentage of children and adolescents on antipsychotics who received blood glucose testing.</li> <li>2. The percentage of children and adolescents on antipsychotics who received cholesterol testing.</li> <li>3. The percentage of children and adolescents on antipsychotics who received blood glucose and cholesterol testing.</li> </ol> <p><b>Applicable Line of Business:</b></p> <ul style="list-style-type: none"> <li>• Medicaid</li> </ul> <p><b>Age Group Included in the Measure:</b> 1 – 17 years</p>	<ul style="list-style-type: none"> <li>• Encourage the legal guardians of your patients prescribed antipsychotic medication to schedule an annual HbA1c test or glucose test and a LDL test at the time of prescribing 2 or more antipsychotic medications.</li> <li>• Follow up with your patient’s legal guardian to discuss and educate on lab results.</li> <li>• To increase compliance, consider ordering the annual HbA1c or glucose, and LDL tests as standing orders.</li> <li>• Coordinate care with your patients’ other treating behavioral health specialists.</li> </ul>	<p><b>** CPT® Codes for Blood Glucose Tests</b> 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951</p> <p><b>** CPT® Codes for HbA1C Tests</b> 83036, 83037, 3044F, 3045F, 3046F</p> <p><b>** CPT® Codes for LDL-C Tests</b> 80061, 83700, 83701, 83704, 83721, 3048F, 3049F, 3050F</p> <p><b>** CPT® Codes for Cholesterol Tests other than LDL</b> 82465, 83718, 84478</p>

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<p><b>Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)</b></p> <p><i>*Applicable Foster Care Measure</i></p> <p><b>Measure Specifications:</b> The percentage of children and adolescents 1–17 years of age who had a <u>new prescription for an antipsychotic medication</u> and had documentation of psychosocial care as first-line treatment.</p> <p><b>Applicable Line of Business:</b></p> <ul style="list-style-type: none"> <li>Medicaid</li> </ul> <p><b>Age Group Included in the Measure:</b> 1 – 17 years</p>	<ul style="list-style-type: none"> <li>Before ordering a new antipsychotic prescription for your patient, consider a referral for a psychosocial assessment or psychosocial treatment.</li> <li>Ensure that the patients' psychosocial assessment or psychosocial treatment is part of your patients' treatment record before writing a new prescription for an antipsychotic medication.</li> </ul> <p>Before prescribing antipsychotic medication for your younger Medicaid patients, refer to the Preferred Drug List (PDL) on the state-specific health plan website.</p>	<p><u>ICD 10-CM Schizophrenia Dx Codes</u> F20.0 - F20.3, F20.5, F20.81, F20.89, F20.9, F25.0, F25.1, F25.8, F25.9</p> <p><u>ICD 10-CM Bipolar Disorder Dx Codes:</u> F30.10 - F30.13, F30.2 - F30.4, F30.8, F30.9, F31.0, F31.10 – F31.13, F31.2., F31.30 - F31.32, F31.4, F31.5, F31.60 - F31.64, F31.70 - F31.78</p> <p><u>ICD 10-CM for Other Psychiatric Disorders Dx Codes</u> F22, F23, F24, F28, F29, F32.3, F33.3, F34.0, F34.2, F34.3, F34.5, F34.8, F34.9, F35.0, F35.1, F35.2, F35.8, F35.9</p> <p><b>** CPT® Codes for Psychological Care:</b> 90832 - 90834, 90836 - 90840, 90845 - 90847, 90849, 90853, 90875, 90876, 90880</p> <p><u>HCPCS Codes for Psychological Care:</u> 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</p>

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<p><b>Follow-Up After Hospitalization For Mental Illness (FUH)</b></p> <p><b>*Applicable Foster Care Measure</b></p> <p><b>Measure Specifications:</b> The percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses and who had a follow-up visit with a mental health provider. Two rates are reported:</p> <ol style="list-style-type: none"> <li>The percentage of discharges for which the member received follow-up within 30 days after discharge. </li> <li>The percentage of discharges for which the member received follow-up within 7 days after discharge.</li> </ol> <p><b>Applicable Lines of Business:</b></p> <ul style="list-style-type: none"> <li>Medicaid</li> <li>Medicare</li> <li>Marketplace</li> </ul> <p><b>Age Group included in the measure:</b> 6 years and older</p>	<p>Follow-up visits that occur on the same day as the IP discharge do not count.</p> <ul style="list-style-type: none"> <li>Schedule the 7-day follow-up visit within 5 days of discharge to allow flexibility in rescheduling.</li> <li>If the member's appointment does not occur within the first 7 days post-discharge, please schedule the appointment to occur within 30 days.</li> </ul> <p><b>2021 FUH Measure Update:</b> Replaced "mental health practitioner" with "mental health provider" (refer to updated taxonomy codes).</p>	<p><b>*ICD-10 Mental Illness Diagnosis Codes:</b> F03.9x, F20-F25.xx, F28-F34.xx, F39-F45.xx, F48.xx, F50-F53.xx, F59-F60.xx, F63-F66.xx, F68-F69.xx, F80-F82.xx, F84.xx, F88-F93.xx, F95.xx, F98-F99.xx</p> <p><b>BH Outpatient **CPT® Codes:</b> 98960-98962, 99078, 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411-99412, 99783, 99510</p> <p><b>BH Outpatient HCPCS:</b> G0155, G0176-G0177, G0409, G0463, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010-H2011, H2013-H2020, M0064, T1015</p> <p><b>Community Mental Health Center POS:</b> 53</p> <p><b>Electroconvulsive Therapy CPT:</b> 90870</p> <p><b>Inpatient Stay UB Rev:</b> 0100-0101, 0110-0114, 0116-0124, 0126-0134, 0136-0144, 0146-0154, 0156-0160, 0164, 0167, 0169-0174, 0179, 0190-0194, 0199-0204, 0206-0214, 0219, 1000-1002</p>

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# HEDIS® MEASUREMENT YEAR 2021 AT-A-GLANCE

## BEHAVIORAL HEALTH MEASURES



HEDIS® Measure	Recommendations	Coding and Services
		<p><u>Nonacute Inpatient Stay UB Rev:</u> 0022, 0024, 0118, 0128, 0138, 0148, 0158, 0199, 0669, 0190-94, 0524-5, 0550-2, 0559-63, 0660-3, 0661-3, 1000-2</p> <p><u>Observation CPT® Codes:</u> 99217-99220</p> <p><u>Outpatient POS:</u> 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 71-72</p> <p><u>Partial Hospitalization POS:</u> 52</p> <p><u>Partial Hospitalization/Intensive Outpatient HCPCS:</u> G0410-G0411, H0035, H2001, H2012, S0201, S9480, S9484-S9485</p> <p><u>Partial Hospitalization/Intensive Outpatient UB Rev:</u> 0905, 0907, 0912, 0913</p> <p><u>Telehealth POS:</u> 02</p> <p><u>Transitional Care Management Services **CPT® Codes:</u> 99495-99496</p>

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HEDIS® Measure	Recommendations	Coding and Services
		<p><u>Visit Setting Unspecified **CPT® Codes:</u>            90791-90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875-90876, 99221-99223, 99231-99233, 99238-99239, 99251-99255</p> <p><u>Mental Health Practitioner/Provider Taxonomy Codes:</u>            102L00000X, 103G00000X, 103T00000X, 103TA0400X, 103TA0700X, 103TB0200X, 103TC0700X, 103TC1900X, 103TC2200X, 103TE1100X, 103TF0000X, 103TF0200X, 103TH0004X, 103TH0100X, 103TM1800X, 103TP0016X, 103TP0814X, 103TP2701X, 103TR0400X, 103TS0200X, 1041C0700X, 2084A0401X, 2084B0002X, 2084B0040X, 2084D0003X, 2084F0202X, 2084H0002X, 2084N0008X, 2084N0400X, 2084N0402X, 2084N0600X, 2084P0005X, 2084P0015X, 2084P0800X, 2084P0802X, 2084P0804X, 2084P0805X, 2084P2900X, 2084S0010X, 2084S0012X, 2084V0102X, 225XM0800X, 363LP0808X, 364SP0807X, 364SP0808X, 364SP0809X, 364SP0810X, 364SP0811X, 364SP0812X, 364SP0813X</p>


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<p><b>Follow-Up after Emergency Department Visit for Mental Illness (FUM)</b></p> <p> <b>*Applicable Foster Care Measure</b></p> <p><b>Measure Specifications:</b> 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:</p> <ol style="list-style-type: none"> <li>The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days).</li> <li>The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).</li> </ol> <p><b>Applicable Lines of Business:</b></p> <ul style="list-style-type: none"> <li>Medicaid</li> <li>Medicare</li> <li>Marketplace</li> </ul> <p><b>Age Group included in the measure:</b> 6 years and older</p>	<p>Follow-up visits that occur on the same day as the ED discharge do not count.</p> <ul style="list-style-type: none"> <li>Schedule the 7-day follow-up visit within 5 days to allow flexibility in rescheduling.</li> <li>If the member's appointment does not occur within the first 7 days post-ED visit, please schedule the appointment to occur within 30 days post-ED visit.</li> <li>Keep in mind that patients in an ED setting may have a medical as well as a comorbid MH diagnosis so communication with the patients' PCP or medical specialist may be helpful in getting the patient into treatment for their mental illness.</li> </ul>	<p><b>*ICD-10 Mental Illness Diagnosis Codes:</b> F03.9x, F20-25.xx, F28-34. xx, F39-45.xx, F48.xx, F50-53.xx, F59-60.xx, F63-66.xx, F68-69.xx, F80-82.xx, F84.xx, F88-93.xx, F95.xx, F98-99.xx</p> <p><b>*Intentional Self-Harm Diagnosis Codes ICD-10 example:</b> T39.92XA</p> <p><b>**Outpatient Follow-Up Visits CPT® Codes :</b> 90791-2, 90832-4, 90836-40, 90845, 90847, 90849, 90853, 90875-6, 98960-2, 98966-8, 99078, 99201-5, 99211-5, 99217-23, 99231-3, 99238-9, 99241-5, 99251-5, 99341-5, 99347-50, 99381-7, 99391-7, 99401-4, 99411-2, 99441-3, 99483, 99495-6, 99510</p> <p><b>HCPCS Codes</b> G0155, G0176-7, G0409, G0463, H0002, H0004, H0031, H0034, H0036-7, H0039-40, H2000, H2010-1, H2013-20, M0064, T1015</p>


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<p><b>Follow-Up after Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)</b> </p> <p><b>Measure Specifications:</b> The percentage of emergency department (ED) visits for members 13 years of age and older with a principal diagnosis of alcohol or other drug (AOD) abuse or dependence, who had a follow up visit for AOD. Two rates are reported:</p> <ol style="list-style-type: none"> <li>1. The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days).</li> <li>2. The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).</li> </ol> <p><b>Applicable Lines of Business:</b></p> <ul style="list-style-type: none"> <li>• Medicaid</li> <li>• Medicare</li> <li>• Marketplace</li> </ul> <p><b>Age Group included in the measure:</b> 13 years and older</p>	<p>Follow-up visits that occur on the same day as the ED discharge do not count.</p> <ul style="list-style-type: none"> <li>• Schedule the 7-day follow-up visit within 5 days to allow flexibility in rescheduling.</li> <li>• If the member's appointment does not occur within the first 7 days post-ED visit, please schedule the appointment to occur within 30 days post-ED visit.</li> <li>• Keep in mind that patients in an ED setting may have a medical as well as a comorbid SUD diagnosis so communication with the patients' PCP or medical specialist may be helpful in getting the patient into SUD treatment.</li> </ul>	<p><u>*ICD-10 Substance Abuse/Dependence Disorder Diagnosis Codes</u> F10-16.xx, F18-19.xx</p> <p><u>**CPT® Codes</u> 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99408, 99409, 99411, 99412, 99510</p> <p><u>Online Assessment:</u> 98969, 99444</p> <p><u>Telephone Visits:</u> 98966-98968, 99441-99443</p> <p><u>TeleHealth</u> POS: 02</p> <p><u>HCPCS:</u> G0155, G0176, G0177, G0396, G0397, G0409-G0411, G0443, G0463, H0001, H0002, H0004, H0005, H0007, H0015, H0016, H0022, H0031, H0034-H0037, H0039, H0040, H0047, H2000, H2001, H2010-H2020, H2035, H2036, M0064, S0201, S9480, S9484, S9485, T1006, T1012, T1015</p>

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HEDIS® Measure	Recommendations	Coding and Services
		<p><b>**FOLLOW-UP GROUP 1 WITH POS</b>  <b>CPT® Codes:</b>            90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876 POS: 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 52, 53, 57, 71, 72 FOLLOW-UP</p> <p><b>**GROUP 2 WITH POS CPT® Codes:</b>            99221-99223, 99231-99233, 99238, 99239, 99251-99255 POS: 52, 53</p>

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HEDIS® Measure	Recommendations	Coding and Services
<p><b>Follow-Up After High-Intensity Care for Substance Use Disorder (FUI)</b></p> <p><b>Measure Specifications:</b> The percentage of acute inpatient hospitalizations, residential treatment or detoxification 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:</p> <ol style="list-style-type: none"> <li>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.</li> <li>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.</li> </ol> <p><b>Applicable Lines of Business:</b></p> <ul style="list-style-type: none"> <li>• Medicaid</li> <li>• Medicare</li> <li>• Marketplace</li> </ul> <p><b>Age Group included in the measure:</b> 13 years and older</p>	<ul style="list-style-type: none"> <li>• Follow-up visits that occur on the same day as the discharge from IP, residential treatment, or detoxification visits do not count.</li> <li>• Schedule the 7-day follow-up visit within 5 days to allow flexibility in rescheduling. Involve the member's caregiver regarding the follow up after the visit or discharge.</li> <li>• If the member's appointment does not occur within the first 7 days post-visit/discharge, please schedule the appointment to occur within 30 days post-visit/discharge.</li> <li>• Follow-up does not include detoxification.</li> <li>• Methadone is not included on the medication lists for this measure.</li> <li>• Non-acute inpatient stays and members in hospice are excluded from this measure.</li> </ul>	<p><u>*ICD-10 codes for commonly used for AOD Abuse and Dependence</u> F10.10, F10.120, F10.121, F10.129, F10.19, F10.20, F10.220, F11.10, F11.121, F11.20, F11.220, F11.23, F11.24, F13.19, F13.220, F14.10, F14.120, F15.10, F15.120, F16.10, F16.120, F18.19, F18.20, F18.220, F19.10, F19.120, F19.239, F19.24, F19.250</p> <p><u>AOD Medication Treatment HCPCS:</u> H0020, H0033, J0570, J0571, J0572, J0573, J0574, J0575, J2315, Q9991, Q9992, S0109</p> <p><u>Detoxification HCPCS:</u> H0008, H0009, H0010, H0011, H0012, H0013, H0014</p> <p><u>Detoxification UBREV Codes:</u> 0116, 0126, 0136, 0146, 0156</p> <p><u>IET Visits Group 1 **CPT®:</u> 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876</p> <p><u>IET POS Group 1 POS:</u> 02, 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 52, 53, 57, 71, 72</p>

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## BEHAVIORAL HEALTH MEASURES

HEDIS® Measure	Recommendations	Coding and Services
		<p><u>IET Visits Group 2 **CPT®:</u> 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255</p> <p><u>IET POS Group 2 POS:</u> 02, 52, 53</p> <p><u>IET Stand Alone Visits **CPT®:</u> 98960, 98961, 98962, 99078, 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99408, 99409, 99411, 99412, 99483, 99510</p> <p><u>IET Stand Alone Visits HCPCS:</u> G0155, G0176, G0177, G0396, G0397, G0409, G0410, G0411, G0443, G0463, H0001, H0002, H0004, H0005, H0007, H0015, H0016, H0022, H0031, H0034, H0035, H0036, H0037, H0039, H0040, H0047, H2000, H2001, H2010, H2011, H2012, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, H2035, H2036, M0064, S0201, S9480, S9484, S9485, T1006, T1012, T1015</p>

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## BEHAVIORAL HEALTH MEASURES

HEDIS® Measure	Recommendations	Coding and Services
		<p><u>IET Stand Alone Visits UBREV Codes:</u>  0510, 0513, 0515, 0516, 0517, 0519,  0520, 0521, 0522, 0523, 0526, 0527,  0528, 0529, 0900, 0902, 0903, 0904,  0905, 0906, 0907, 0911, 0912, 0913,  0914, 0915, 0916, 0917, 0919, 0944,  0945, 0982, 0983</p> <p><u>Inpatient Stay UBREV:</u>  0100, 0101, 0110, 0111, 0112, 0113,  0114, 0116, 0117, 0118, 0119, 0120,  0121, 0122, 0123, 0124, 0126, 0127,  0128, 0129, 0130, 0131, 0132, 0133,  0134, 0136, 0137, 0138, 0139, 0140,  0141, 0142, 0143, 0144, 0146, 0147,  0148, 0149, 0150, 0151, 0152, 0153,  0154, 0156, 0157, 0158, 0159, 0160,  0164, 0167, 0169, 0170, 0171, 0172,  0173, 0174, 0179, 0190, 0191, 0192,  0193, 0194, 0199, 0200, 0201, 0202,  0203, 0204, 0206, 0207, 0208, 0209,  0210, 0211, 0212, 0213, 0214, 0219,  1000, 1001, 1002</p> <p><u>Nonacute Inpatient Stay Other Than Behavioral Health Accommodations UBREV:</u>  0022, 0024, 0118, 0128, 0138, 0148,  0158, 0190, 0191, 0192, 0193, 0194,  0199, 0524, 0525, 0550, 0551, 0552,  0559, 0660, 0661, 0662, 0663, 0669</p> <p><u>Observation **CPT®:</u>  99217, 99218, 99219, 99220</p> <p><u>Residential Behavioral Health Treatment HCPCS:</u>  H0017, H0018, H0019, T2048</p>

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# HEDIS® MEASUREMENT YEAR 2021 AT-A-GLANCE

## BEHAVIORAL HEALTH MEASURES



HEDIS® Measure	Recommendations	Coding and Services
		<p><u>Online Assessments:</u> 99869, 99444</p> <p><u>Telephone Visits:</u> 98966, 98967, 98968, 99441 – 99443</p> <p><u>Telehealth Modifier:</u> 95, GT</p>

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HEDIS® Measure	Recommendations	Coding and Services
<p><b>Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET)</b></p> <p><b>Measure Specifications:</b> The percentage of adolescent and adult members with a <u>new</u> episode of alcohol or other drug (AOD) abuse or dependence who received the following.</p> <ul style="list-style-type: none"> <li><i>Initiation of AOD Treatment.</i> The percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth or medication treatment within 14 days of the diagnosis.</li> <li><i>Engagement of AOD Treatment.</i> The percentage of members who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit. </li> </ul> <p><b>Applicable Lines of Business:</b></p> <ul style="list-style-type: none"> <li>Medicaid</li> <li>Medicare</li> <li>Marketplace</li> </ul> <p><b>Age Group included in the measure:</b> 13 years and older</p>	<ul style="list-style-type: none"> <li>A PCP or medical specialist, along with BH practitioners and providers may provide the AOD diagnosis a variety of settings, such as, but not limited to, a medical ED visit, PCP office visit, acute IP medical treatment, or treatment for detox. Once the patient has a new AOD diagnosis, the initiation phase begins.</li> <li>Schedule the initial 14-day follow-up visit within 10 days of new AOD diagnosis to allow flexibility in rescheduling.</li> <li>At the end of the initial follow-up appointment, schedule two more follow-up appointments to occur within 34 days of the initial follow-up appointment.</li> <li>When treating a member for issues related to AOD, remember to code the diagnosis on every claim.</li> </ul>	<p><u>*ICD-10 codes for commonly used for AOD Abuse and Dependence</u> F10.10, F10.120, F10.121, F10.129, F10.19, F10.20, F10.220, F11.10, F11.121, F11.20, F11.220, F11.23, F11.24, F13.19, F13.220, F14.10, F14.120, F15.10, F15.120, F16.10, F16.120, F18.19, F18.20, F18.220, F19.10, F19.120, F19.239, F19.24, F19.250</p> <p><u>Medication-assisted Treatment Codes:</u> H0020, H0033, J0570-J0575, J2315, S0109, Q9991, Q9992 HCPCS: G0155, G0176, G0177, G0396, G0397, G0409-G0411, G0443, G0463, H0001, H0002, H0004, H0005, H0007, H0015, H0016, H0022, H0031, H0034-H0037, H0039, H0040, H0047, H2000, H2001, H2010-H2020, H2035, H2036, M0064, S0201, S9480, S9484, S9485, T1006, T1012, T1015</p> <p><u>ED **CPT® Codes :</u> 99281-99285</p> <p><u>ED UB Rev Codes:</u> 0450-0452, 0456, 0459, 0981</p> <p><u>IET POS Group 1:</u> 02, 03, 05, 07, 09, 11-20, 22, 33, 49-50, 52-53, 57, 71-72</p> <p><u>IET POS Group 2:</u> 02, 52, 53</p>

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# HEDIS® MEASUREMENT YEAR 2021 AT-A-GLANCE

## BEHAVIORAL HEALTH MEASURES



HEDIS® Measure	Recommendations	Coding and Services
		<p><u>IET Stand-Alone Visits **CPT® Codes:</u>            98960-98962, 99078, 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99408-99409, 99411-99412, 99510</p> <p><u>IET Stand-Alone Visits HCPCS:</u>            G0155, G0176-G0177, G0396-G0397, G0409-G0411, G0443, G0463, H001-H0002, H0004-H0005, H0007, H0015-H0016, H0022, H0031, H0034-H0037, H0039, H0040, H2000-H2001, H2010-H2020, H2035-H2036, M0064, S0201, S9480, S9484-S9485, T1006, T1012, T1015</p> <p><u>IET Stand-Alone Visits UB Rev:</u>            0510, 0513, 0515-0517, 0519-0523, 0526-0529, 0900, 0902-0907, 0911-0917, 0919, 0944-0945, 0982-0983</p> <p><u>IET Visits Group 1 **CPT® Codes:</u>            90791-90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875-90876</p> <p><u>IET Visits Group 2 **CPT® Codes:</u>            99221-99223, 99231-99233, 99238-99239, 99251-99255</p> <p><u>Inpatient Stay UB Rev:</u>            0100-0101, 0110-0114, 0116-0124, 0126-0134, 0136-0144, 0146-0154, 0156-0160, 0164, 0167, 0169-0174, 0179, 0190-0194, 0199-0204, 0206-0214, 0219, 1000-1002</p>

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# HEDIS® MEASUREMENT YEAR 2021 AT-A-GLANCE

## BEHAVIORAL HEALTH MEASURES



HEDIS® Measure	Recommendations	Coding and Services
		<p><u>Observations **CPT® :</u> 99217-99220</p> <p><u>Online Assessments **CPT®:</u> 98969, 99444, Telephone Visits CPT: 98966-98968, 99441-99443</p> <p><u>Telephone Visits:</u> 98966-98968, 99441-99443</p> <p><u>Telehealth POS:</u> 02</p> <p><u>Online Assessment:</u> 98969, 99444</p>

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## BEHAVIORAL HEALTH MEASURES

HEDIS® Measure	Recommendations	Coding and Services
<p><b>Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA)</b></p> <p><b>Measure Specifications:</b> The 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.</p> <p><b>Applicable Lines of Business:</b></p> <ul style="list-style-type: none"> <li>Medicaid</li> <li>Medicare</li> </ul> <p><b>Age Group included in the measure:</b> 18 years and older</p>	<ul style="list-style-type: none"> <li>Consider the use of long-acting injectable antipsychotic medications to increase adherence.</li> <li>Educate your patients on how to take their medications. Include the importance of continuing to take the medication even if they begin feeling better and to not stop taking the medication without consulting you first.</li> <li>The treatment period is the time between the members first antipsychotic medication fill date in the current year through Dec 31st of the current year.</li> </ul> <p>For Medicaid, please refer to the Preferred Drug List (PDL) on the state-specific website.</p> <p>Before prescribing antidepressant medication for your Medicare patients refer to the Health Plan Formulary.</p>	<p><b>*ICD-10 Dx Codes</b></p> <p>F20.0</p> <p>F20.1</p> <p>F20.2</p> <p>F20.3</p> <p>F20.5</p> <p>F20.81</p> <p>F20.89</p> <p>F20.9</p> <p>F25.0</p> <p>F25.1</p> <p>F25.8</p> <p>F25.9</p> <p><b>Long-Acting Injections HCPCS Codes:</b></p> <ul style="list-style-type: none"> <li>14-day supply: J2794</li> <li>28-day supply: J0401, J1631, J2358, J2426, J2680 C9035</li> <li>30-day supply-C9037</li> </ul>

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## BEHAVIORAL HEALTH MEASURES

HEDIS® Measure	Recommendations	Coding and Services
<p><b>Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are Using Antipsychotic Medications (SSD)</b></p> <p><b>Measure Specifications:</b> The 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 during the measurement year.</p> <p><b>Applicable Lines of Business:</b></p> <ul style="list-style-type: none"> <li>Medicaid</li> </ul> <p><b>Age Group included in the measure:</b> 18 – 64 years</p>	<ul style="list-style-type: none"> <li>Encourage members with schizophrenia or bipolar disorders who are also on antipsychotic medication to schedule an annual HbA1c test or glucose test at the time of their visit.</li> <li>To increase compliance, consider ordering the HbA1c or glucose test as an annual standing order.</li> </ul>	<p><b>*ICD-10 Codes for Schizophrenia:</b> F20.0-F20.5, F20.81, F20.89, F20.9, F25.0-F25.1, F25.8-F25.9</p> <p><b>*ICD-10 Codes for Bipolar Disorder:</b> F30.10-F30.13, F30.2-F30.4, F30.8-F30.9, F31.10-F31.13, F31.2, F31.30-F31.32, F31.4-F31.5, F31.60-F31.64, F31.70-F31.78</p> <p><b>**CPT® Codes for Glucose Tests:</b> 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951</p> <p><b>**CPT® Codes for HbA1c Tests:</b> 83036, 83037 CPT II: 3044F, 3045F, 3046F, ≥7%–&lt;8%: 3051F, ≥8%–≤9%: 3052F</p>

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