

**CareSource** recognizes the outstanding work you are doing every day to improve your patients' health and quality outcomes.

CareSource has created this **2020 HEDIS® Quality Companion Guide** to share the benefits of including CPT® Category II codes with your claim submissions. Category II codes enable you to share preventative care and diagnostic test results, which allow for better understanding of population health.

Services identified in some measures may not be relevant to patients with certain medical histories. Submission of appropriate ICD-10 codes will exclude those individuals from the measures. These exclusions will allow CareSource to provide cleaner reporting, helping you clearly identify the patients who need care.

## Additional Benefits

- **Enhanced Reporting** Identifying and closing gaps in care is easier with reporting that reflects complete patient care, and includes information that tracks performance measures.
- **Fewer Medical Record Requests** Including CPT® II codes can substantially reduce the number of patient charts requiring review, thereby minimizing your administrative burden to confirm care you have completed.
- Improved Quality Outcome Tracking Gaining deeper understanding of your patient population can support your own Quality Improvement initiatives.
- **Exclusions** due to medical history helps improve care by allowing you to focus efforts on cancer screenings and disease-specific treatment, and manage patients most likely to benefit from that care.

## Coding for Outcome Measures

Each CPT® Category II code correlates to a test value or measurement. For outcome measures like blood pressure readings and HbA1c values, add the CPT® II code that corresponds to the result. Refer to chart below for detailed information.

## Quality Measures with CPT® Category II Codes

Include CPT® II codes when completing services that help meet the following measures:

- Care of Older Adults
- Controlling High Blood Pressure
- Diabetes HbA1c control
- Diabetes Retinal Exam
- Diabetes Kidney Disease Monitoring
- Diabetes Blood Pressure Control
- Medication Reconciliation Post-Discharge
- Prenatal and Postpartum Care
- Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia
- Diabetes Monitoring for People with Diabetes and Schizophrenia
- Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are Using Antipsychotic Medications
- Metabolic Monitoring for Children and Adolescents on Antipsychotics



## CPT® Category II Codes and Descriptions

The chart below defines the CPT®II codes associated with the identified measures. Submitting claims using these codes helps improve performance reporting of quality-based care linked to Stars and HEDIS metrics, and are not generally reimbursable. See CareSource Adult HEDIS and Behavioral Health HEDIS Coding Guides for a complete list of CPT®/HCPCS/ICD-10 codes.

Measure	Qualifying Condition and/or CPT Code	CPTII Code	Code Definition
Prevention and Screening			
Advance Care Planning	99483, 99497; S0257	1123F	Advance care planning discussed and documented  – advance care plan or surrogate decision maker documented in record
		1124F	Advance care planning discussed and documented  – Pt did not wish to or was unable to provide an advance care plan or name a surrogate decision maker
		1157F	Advance care plan or similar document in medical record
		1158F	Advance care planning discussion documented
Medication Review	90863, 99483, 99605,	1159F	Medication list documented
	99606, G8427	1160F	Medication review by prescribing care provider or clinical pharmacist documented
Functional Status	99483; G0438, G0439	1170F	Functional status assessed
Pain Assessment	No CPT/HCPCS codes	1125F	Pain assessment – pain documented
		1126F	Pain assessment – no pain documented
Screening Measure Potent	ial Exclusionary Codes		
Breast Cancer Screening			
ICD-10	Z90.13	Z90.13	Acquired absence of bilateral breasts and nipples
History of bilateral mastectomy	Z90.12	Z90.12	Acquired absence of left breast and nipple
	Z90.11	Z90.11	Acquired absence of right breast and nipple
Cervical Cancer Screening	/ Chlamydia Screening		
ICD-10	Q51.5	Q51.5	Agenesis and aplasia of cervix
History of total hysterectomy	Z90.710	Z90.710	Acquired absence of both cervix and uterus
	Z90.712	Z90.712	Acquired absence of cervix with remaining uterus
Colorectal Cancer Screenii *Medicare Only	ng		
ICD-10 History of colorectal cancer	Z85.038	Z85.038	Personal history of other malignant neoplasm of large intestine
	Z85.048	Z85.048	Personal history of other malignant neoplasm of rectum, rectosigmoid junction and anus
Cardiovascular Measures			
Controlling High Blood Pre	essure		
Outpatient or Remote Blood Pressure Monitoring	93784, 93788, 93790, 99091, 99453, 99454, 99457	3074F	Systolic <130
		3075F	Systolic 130-139
		3077F	Systolic 140 or higher
		3078F	Diastolic <80
		3079F	Diastolic 80-89
		3080F	Diastolic 90 or higher

Measure	Qualifying Condition and/or CPT Code	CPTII Code	Code Definition
Diabetes Measures (Compre	hensive Diabetes Care)		
Diabetes A1c Control			
HbA1c	83036, 83037	3044F	HbA1c <7%
		3046F	HbA1c >9%
		3051F	HbA1c >7% and <8%
		3052F	HbA1c >8% and <9%
Diabetes Retinal Exam			
	65091, 65093, 65101, 65103, 65105, 65110, 65112, 65114, 67028,	2022F	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed
	67030, 67031, 67036, 67039, 67040-	2024F	Diabetic retinal screening with eye care professional w/ evidence of retinopathy
	67043, 67101, 67105, 67107, 67108, 67110, 67113, 67121, 67141,	2026F	Diabetic retinal screening with eye care professional w/ evidence of retinopathy
	67145, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228, 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92227,92228, 92230, 92235, 92240, 92250, 92260, 99203-99205, 99213-99215, 99242- 99245; S0620, S0621, S3000	3072F	Low risk for retinopathy (no evidence of retinopathy in the prior year
Diabetic Kidney Disease Mo	nitoring		
	81000-81003, 81005, 82042-82044, 84156	3060F	Positive microalbuminuria test result documented and reviewed
		3061F	Negative microalbuminuria test result documented and reviewed
		3062F	Positive macroalbuminuria test result documented and reviewed
		3066F	Documentation of treatment of nephropathy
		4010F	ACE inhibitor or ARB therapy prescribed or currently being taken
Diabetes Blood Pressure Co	ntrol		
Remote Blood Pressure Monitoring	93788, 93790, 99091	3074F	Systolic <130
		3075F	Systolic 130-139
		3077F	Systolic 140 or higher
		3078F	Diastolic <80
		3079F	Diastolic 80-89
		3080F	Diastolic 90 or higher
Medication Management and	d Care Coordination		
Medication Reconciliation W		e Discharge	
	99495, 99496, 99483	1111F	Discharge medications reconciled with current medications in outpatient record
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Measure	Qualifying Condition and/or CPT Code	CPTII Code	Code Definition
Access and Availability of C	are		
Prenatal and Postpartum C	are		
Stand-Alone Prenatal Visits	H1000 – H1004	0500F	Initial prenatal care visit
		0501F	Prenatal Flow Sheet
		0502F	Subsequent prenatal care
Postpartum Visit	57170, 58300, 59400, 59410, 59430, 59510, 59515, 59610, 59614, 59618, 59622, 88141, 88143, 88147, 88148, 88150, 88152, 88153, 88164-88167, 88174, 88175; G0101, G0123, G0124, G0141, G0143-G0145, G0147, G0148, P3000, P3001, Q0091	0503F	Postpartum Care visit
Behavioral Health Measure	S		
Cardiovascular Monitoring	for People with Cardiova	scular Disease an	d Schizophrenia
LDL-C	80061, 83700, 83701, 83704, 83721	3048F	LDL-C <100 mg/dL
<b>Diabetes Monitoring for Pe</b>	ople with Diabetes and S	chizophrenia	
HbA1c	83036, 83037	3044F	HbA1c <7%
		3046F	HbA1c >9%
LDL-C	80061, 83700, 83701,	3048F	LDL-C <100 mg/dL
	83704, 83721	3049F	LDL-C 100-129 mg/dL
		3050F	LDL-C >130 mg/dL
Diabetes Screening for Peo	ple with Schizophrenia o	r Bipolar Disorder	who are using Antipsychotic Medications
HbA1c	80047, 80048, 80050,	3044F	HbA1c <7%
	80053, 80069, 82947,		
	82950, 82951, 83036, 83037	3046F	HbA1c >9%
Metabolic Monitoring for C			
HbA1c	80047, 80048, 80050,	3044F	HbA1c <7%
	80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951, 83036, 83037	3046F	HbA1c >9%
		3051F	HbA1c >7% and <8%
		3052F	HbA1c >8% and <9%
LDL-C	80061, 82465, 83700, 83701, 83704, 83718, 83721, 83722, 84478		
		3048F 3049F	LDL-C <100 mg/dL LDL-C 100-129 mg/dL
		3050F	LDL-C >130 mg/dL

<sup>\*</sup>Although the CPT®II codes above are applicable for HEDIS® measures, coding should always be validated per federal and state requirements. HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

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