## 2019

# HEDIS® CODING GUIDE - PEDIATRIC

Use this coding guide as a resource to help you correctly document pediatric visits at your practice to meet HEDIS measures.

MEASURE	DESCRIPTION OF MEASURE	DOCUMENTATION TIPS	COMPLIANCE CODES & MEASURE TIPS
UTILIZATION OF SERVICES			
Well-Child Visits in the First 15 Months of Life* Ages 0 to 15 months Six visits	Addresses the adequacy of well-child care for infants. Measures the percentage of children who had between one and six or more well-child visits by age 15 months	Documentation of a visit to a PCP, the date of the visit and all of the following:  • A health history  • A development history (physical and mental)  • A physical exam  • Health education/anticipatory guidance  • Services specific to the assessment or treatment of an acute or chronic condition do not count toward this measure	ICD-10: Z00.XXX, Z02.XXX Well Care CPT: 99381, 99382, 99391, 99392, 99461 HCPCS: G0438, G0439
Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life* Ages 3 to 6 years 1 visit annually	Addresses the use of routine check-ups for children ages 3, 4, 5 and 6 years of age. Measures the percentage of children in the above age range who received at least one well-child visit with a primary care provider (PCP) during the measurement year		ICD-10: Z00.XXX, Z02.XX, Well Care CPT: 99382, 99383, 99392, 99393 HCPCS: G0438, G0439
			100 40 700 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

### Adolescent Well-**Care Visits**

Age 12 to 21 years One visit annually with a PCP or OB/GYN

The percentage of members 12 to 21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN during the measurement year

One visit annually providing documentation of:

- Assessment or counseling or education on risk behaviors and preventive actions associated with sexual activity
- Depression
- The risks of tobacco usage
- The risks of substance use (including alcohol)

ICD-10: Z00.XXX, Z02.XX, Well Care CPT: 99384, 99385,

99394. 99395

**HCPCS:** G0438, G0439

\*All of the above well-child visits must include documentation of the following elements: (1) physical exam, (2) health and developmental history (physical and mental) and (3) health education/anticipatory guidance.

#### EFFECTIVENESS OF CARE: OVERUSE/APPROPRIATENESS

Appropriate **Treatment for Children With** Infection

Ages 3 months to 18 years

The percentage of children 3 months to 18 years of age who were given a infection (URI) and were not dispensed an antibiotic prescription.

The common cold is a frequent reason for children visiting the doctor's office. Pediatric clinical practice guidelines do not recommend antibiotics for a majority **Upper Respiratory** diagnosis of upper respiratory of upper respiratory tract infections because of the viral etiology of these infections, including the common cold. This measure is reported as an inverted rate. A higher rate indicates appropriate treatment of children with URI (i.e., the proportion for whom antibiotics were not prescribed).

This measure includes patients who have only one diagnosis for the office visit.

The upper respiratory diagnoses are ICD-10: J00, J06.0, J06.9

Compliance occurs only if patient is not prescribed an antibiotic medication.



#### **COMPLIANCE CODES & MEASURE TIPS**

#### EFFECTIVENESS OF CARE: PREVENTION AND SCREENING

Childhood **Immunization Status** By a child's second birthday

Percentage of children who became 2 years old during the measurement year who received the following vaccines on or before 2 years of age

A note indicating the name of the specific antigen and the date of the following immunizations:

- 4 DTaP
- 3 polio (IPV)
- 1 measles, mumps and rubella (MMR)
- 3 H influenza type B (HiB)
- 3 hepatitis B (HepB)
- 1 chicken pox (VZV)
- 4 pneumococcal conjugate (PCV)
- 1 hepatitis A (HepA)
- 2 or 3 rotavirus (RV)
- 2 influenza (flu)

Immunizations must be administered by the child's second birthday.

**DTaP CPT:** 90698, 90700, 90721,

90723

**IPV CPT:** 90698, 90713, 90723 MMR CPT: 90707, 90710 **HIB CPT:** 90644-90648, 90698,

90721, 90748

HepB CPT: 90633, 90723, 90740,

90744, 90747, 90748 HepB HCPS: G0010 **VCV CPT:** 90710, 90716 **PCV CPT:** 90669, 90670

**HCPS:** G0009 **HepA CPT**: 90633

Rotavirus/Rotarix CPT: 90681

RotaTeg CPT: 90680

Influenza CPT: 90655, 90657, 90661, 90662, 90673, 90685-90688

**HCPCS:** G0008

**Immunizations** for **Adolescents** By a child's 13th birthday

The percentage of adolescents 13 years of age who received the applicable vaccines by their 13th birthday

1 dose of meningococcal

1 Tdap

3 human papillomavirus (HPV) – males and females

Immunizations must be administered by a child's 13th birthday.

Meningococcal Vaccine Administered CPT: 90734

**Tdap Vaccine Administered CPT:** 

90715

**HPV Vaccine Administered CPT:** 

90649, 90650, 90651

Weight **Assessment** and Counselina for Nutrition and Physical Activity Ages 3 to 17 vears One visit annually with a PCP or OB/GYN

The percentage of children and adolescents who had an outpatient visit with a PCP or OB/GYN and received the following documentation during the measurement year

Documentation of **all** of the following annually:

#### BMI percentile NOT BMI value

Documentation must include height, weight and BMI percentile during the measurement year. The height, weight and BMI percentile must be from the same data source.

Either of the following meets criteria for BMI percentile:

- BMI percentile documented as a value (e.g., 85th percentile)
- BMI percentile plotted on an age-growth chart

#### **Counseling for nutrition**

Documentation must include a note indicating the date and at least one of the following:

- Discussion of current nutrition behaviors (e.g., eating habits or dieting behaviors)
- Checklist indicating nutrition was addressed
- Counseling or referral for nutrition education
- Providing the member with educational materials on nutrition during a face-to-face visit
- Anticipatory guidance for nutrition
- Obesity counseling

Show evidence of all three below components:

- OR -

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

BMI percentage value or BMI percentage plotted on an age growth chart with notation of height and weight include

- WITH -

Counseling for Nutrition CPT:

97802, 97803, 97804

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

ICD-10: Z71.3

- OR -

(continued on next page)

<sup>\*</sup>In order to receive reimbursement for the immunization, providers must bill the vaccine code along with the following Administration Codes: 90460, 90471-90474

#### MEASURE DESCRIPTION **COMPLIANCE CODES & MEASURE TIPS DOCUMENTATION TIPS** Counseling for physical activity **Documentation of nutrition counseling that includes** Documentation must include a note one: indicating the date and at least one of the Checklist Anticipatory guidance following: Discussion of current physical activity Counseling or referral Discussion of nutritional behaviors behaviors (e.g., exercise routines, Education materials/handouts participation in sports activities or sports physicals) Weight/obesity counseling Checklist indicating physical activity - AND was addressed Counseling or referral for physical **Counseling for Physical Activity HCPCS:** S9451, G0447 ICD-10: Z02.5 activity Providing the member with educational - OR materials on physical activity during a Documentation of counseling for physical activity face-to-face visit that includes one: Anticipatory guidance specific to the Checklist child's physical activity Anticipatory guidance Weight or obesity counseling Counseling or referral Discussion of nutritional behaviors Education materials/handouts Weight/obesity counseling Lead Test CPT: 83655 Lead The percentage of Documentation in the medical record must children 2 years of Screening in include **both** of the following: age who had one • A note indicating the date the test was Children or more capillary By a child's performed or venous lead second • The result or finding blood test for lead birthday poisoning by their second birthday **CPT:** 87110, 87270, 87320, 87490, 87491, 87492, 87810 Chlamydia Women 16 to 24 Women who identified as sexually active Screening in years of age who were should be tested. Women are considered

Chlamydia Screening in Women Women, ages 16 to 24 years

Women 16 to 24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year

Women who identified as sexually active should be tested. Women are considered sexually active if there is evidence of the following:

- Contraceptives are prescribed
- Medical coding

## **EPSDT SCREENING REQUIREMENTS FOR MEDICAID PATIENTS**

- A comprehensive health and developmental history, including both physical and mental health development
- A comprehensive unclothed physical exam, which includes pelvic exams and Pap test for sexually active females
- Appropriate immunizations according to age and health history
- Laboratory tests, including blood lead screening

Health education, including anticipatory guidance; an evaluation of ageappropriate risk factors should be performed at each visit; PMPs must provide counseling or guidance to members, parents or guardians, as appropriate:

- Nutritional assessment
- Dental assessment
- Tuberculosis screening
- Sensory screening (vision and hearing)
- Documented and current immunizations

If a member is seen for a problem/sick-visit and well-care visit during the same date of service, the problem/sick-visit can be billed separately using modifier 25 (separate significantly identifiable evaluation and management). The problem/sick-visit requires additional moderate-level evaluation to qualify as a separate service on the same date.

#### EFFECTIVENESS OF CARE: RESPIRATORY

Medication Ratio and Management for people with **Asthma** Ages 5 to 64 years

Ages 5 to 64 years with persistent asthma and were dispensed appropriate medications remaining on them during the treatment period

- Medications given as oral, inhaler or as an injection are counted
- · Controller medication(s) should account for ≥0.50 of total asthma medications dispensed
- Those who remained on an asthma controller medication for at least 75 percent of their treatment period

Compliance occurs only if the patient fills the prescription. Encourage the patient to fill prescriptions on time and take medications as prescribed.

**Appropriate Testing for** Children with **Pharvngitis** Ages 3 to 18 years

Children 3 to 18 years of age with a diagnosis of pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode Documentation in the medical record must include **both** of the following:

- Diagnosis of pharvngitis
- Antibiotic dispensed on or up to three 87650, 87651, 87652, 87880 days after date of service

Need evidence of all three below components:

**Strep Test CPT Codes:** 87070, 87071, 87081, 87430,

- WITH -

Pharyngitis Diagnostic ICD-10 Codes: J02.0, J02.8-J03.01, J03.80, J03.81, J03.90, J03.91

- AND -

Prescribed antibiotic is filled by a pharmacy.

## EFFECTIVENESS OF CARE: BEHAVIORAL HEALTH

Follow-Up Care for Children Prescribed **ADHD** Medication Ages 6 to 12 years

The percentage of children newly prescribed attention-deficit/ hyperactivity disorder (ADHD) medication who had at least three followup 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.

**Initiation Phase:** The percentage of members 6 to 12 years of age with an ambulatory prescription dispensed for ADHD medication, who had one followauthority during the 30-day initiation phase.

**Continuation and Maintenance** (C&M) Phase: The percentage of members 6 to 12 years of with an ambulatory prescription dispensed for ADHD medication, who remained on the in addition to the visit in the initiation phase, had at least two follow-up visits with a practitioner within 270 days (9 months) after the initiation phase ended.

#### **Initiation Phase:**

**CPT:** 90791, 90792, 90832-90840, 90845, 90847, 90849, 90853, 90875, 90876, 96150-96154, 98960-98962, 99078, 99201-992015, 99211-99215, 99217-99223, 99231-99233, 99238, 99239, 99241-99245, 99251-99255, 99341-99345, 99347-99350, 99381-99387, up visit with practitioner with prescribing 99391-99397, 99401-99404, 99411, 99412, 99510 **HCPCS:** G0155, G0176, G0177, G0409-G0411, G0463, H0002, H0004, H0031, H0034-H0040, H2000, H2001, H2010-H2020, M0064, S0201, S9480, S9484, S9485, T1015

> **Revenue Code:** 0510, 0513, 0515-0517, 0519-0523, 0526-0529, 0900, 0902-0905, 0907, 0911-0917, 0919, 0982.0983

medication for at least 210 days and who. Continuation and Maintenance (C&M) Phase:

Any of the above codes or

**Telephone Visit CPT:** 98966-98968, 99441-99443

Note: One of the C&M visits must be face to face with the patient

## EFFECTIVENESS OF CARE: ACCESS/AVAILABILITY OF CARE

**Annual Dental** Visit

The percentage of members ages 2 to 20 Ages 2 to 20 years who had at least one dental visit during the measurement year

Documentation of at least one dental visit with a dental provider during the measurement year. The measure is only applicable if dental care is a covered.

Any claim with a dental provider

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