90688	CPT: Influenza virus vaccine, quadrivalent (IIV4), split virus, 0.5 mL dosage, for intramuscular use			
90694	CPT: Influenza virus vaccine, quadrivalent (alIV4), inactivated, adjuvanted, preservative free, 0.5 mL dosage, for intramuscular use			
G0009	HCPCS: Administration of pneumococcal vaccine			
90670	CPT: Pneumococcal conjugate vaccine, 13 valent (PCV13), for intramuscular use			
90732	CPT: Pneumococcal polysaccharide vaccine, 23-valent (PPSV23), adult or immunosuppressed patient dosage, when administered to individuals 2 years or older, for subcutaneous or intramuscular use			
Childho	od Immunization Status Combo 10 (CIS)			
DTAP				
90698	CPT: Diphtheria, tetanus toxoids, acellular pertussis vaccine, Haemophilus influenzae type b, and inactivated poliovirus vaccine, (DTaP-IPV/Hib), for intramuscular use			
90700	CPT: Diphtheria, tetanus toxoids, and acellular pertussis vaccine (DTaP) when administered to individuals under 7 years, for intramuscular use			
90723	CPT: Diphtheria, tetanus toxoids, acellular pertussis vaccine, hepatitis B, and inactivated poliovirus vaccine (DTaP-HepB-IPV), for intramuscular use			
HiB				
90644	CPT: Meningococcal conjugate vaccine, serogroups C & Y and Haemophilus influenzae type b vaccine (Hib-MenCY), 4 dose schedule, when administered to children 6 weeks-18 months of age, for intramuscular use			
90647	CPT: Haemophilus influenzae type b vaccine (HiB), PRP-OMP conjugate, 3 dose schedule, for intramuscular use			
90648	CPT: Haemophilus influenzae type b vaccine (Hib), PRP-T conjugate, 4 dose schedule, for intramuscular use			
90748 CPT: Hepatitis B and Haemophilus influenzae type b vaccine (Hib- HepB), for intramuscular use				
HepA				
90633	CPT: Hepatitis A vaccine (HepA), pediatric/adolescent dosage-2 dose schedule, for intramuscular use			
HepB				
90740	CPT: Hepatitis B vaccine (HepB), dialysis or immunosuppressed patient dosage, 3 dose schedule, for intramuscular use			
90744	CPT: Hepatitis B vaccine (HepB), pediatric/adolescent dosage, 3 dose schedule, for intramuscular use			
90747	<b>CPT:</b> Hepatitis B vaccine (HepB), dialysis or immunosuppressed patient dosage, 4 dose schedule, for intramuscular use			
IPV				
90713	<b>CPT:</b> Poliovirus vaccine, inactivated (IPV), for subcutaneous or intramuscular use			
Influenz	а			
90655	CPT: Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, 0.25 mL dosage, for intramuscular use			
90685	CPT: Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.25 mL, for intramuscular use			
MMR				
90707	CPT: Measles, mumps and rubella virus vaccine (MMR), live, for subcutaneous use			

710 V	CPT: Measles, mumps, rubella, and varicella vaccine (MMRV), live, for subcutaneous use	2026F	CPT II: Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed; with evidence of retinopathy (DM)		
670	CPT: Pneumococcal conjugate vaccine, 13 valent (PCV13), for intramuscular use	2033F	CPT II: Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed;		
TAVIR	RUS 3 DOSE		without evidence of retinopathy (DM)		
680	CPT: Rotavirus vaccine, pentavalent (RV5), 3 dose schedule, live, for	S3000	HCPCS: Diabetic indicator; retinal eye exam, dilated, bilateral		
TA\/ID	oral use	Other Ey	ye Exams		
681	CPT: Rotavirus vaccine, human, attenuated (RV1), 2 dose schedule, live. for oral use	S0620	HCPCS: Routine ophthalmological examination including refraction by ophthalmologist or optometrist; new patient		
V	live, for oral use	S0621	HCPCS: Routine ophthalmological examination including refraction by ophthalmologist or optometrist; established patient		
716	CPT: Varicella virus vaccine (VAR), live, for subcutaneous use		CPT II: Low risk for retinopathy (no evidence of retinopathy in the		
	ation for Adolescents (IMA)	3072F	prior year) need prior year exam		
	ococcal	92229	CPT: Imaging of retina for detection or monitoring of disease;		
migc	CPT: Meningococcal conjugate vaccine, serogroups A, C, W, Y, quad-		point-of-care automated analysis and report, unilateral or bilateral		
619	rivalent, tetanus toxoid carrier (MenACWY-TT), for intramuscular use		Test (CDC, SSD, SMD)		
	CPT: Meningococcal conjugate vaccine, serogroups A, C, W, Y,	83036	CPT: Hemoglobin; glycosylated (A1c)		
734	quadrivalent, diphtheria toxoid carrier (MenACWY-D) or CRM197 carrier (MenACWY-CRM), for intramuscular use	83037	CPT: Hemoglobin; glycosylated (A1c) by device cleared by FDA for home use		
ар	, , , , , , , , , , , , , , , , , , , ,	3044F	CPT II: Most recent hemoglobin A1c (HbA1c) level less than 7.0%		
715	CPT: Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap), when administered to individuals 7 years or older, for	3051F	CPT II: Most recent hemoglobin A1c (HbA1c) level greater than or equal to 7.0% and less than 8.0%		
	intramuscular use	3052F	CPT II: Most recent hemoglobin A1c (HbA1c) level greater than or		
V		20465	equal to 8.0% and less than or equal to 9.0%		
649	CPT: Human Papillomavirus vaccine, types 6, 11, 16, 18, quadrivalent (4vHPV), 3 dose schedule, for intramuscular use	3046F	CPT II: Most recent hemoglobin A1c level greater than 9.0% s Care - Kidney Health Evaluation (KED - both screenings required)		
650	CPT: Human Papillomavirus vaccine, types 16, 18, bivalent (2vHPV), 3 dose schedule, for intramuscular use	Diabete	CPT: Basic metabolic panel (Calcium, ionized) This panel must include the following: Calcium, ionized (82330) Carbon dioxide		
651	CPT: Human Papillomavirus vaccine types 6, 11, 16, 18, 31, 33, 45, 52, 58, nonavalent (9vHPV), 2 or 3 dose schedule, for intramuscular use	80047	(bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Potassium (84132) Sodium (84295) Urea Nitrogen (BUN) (84520)		
HRO	NIC CONDITIONS	82043	CPT: Albumin; urine (eg, microalbumin), quantitative		
betes	(CDC)	82565	CPT: Creatinine; blood		
3.03	ICD 10: Prediabetes (for reference only; not in HEDIS value set)	82570	CPT: Creatinine; other source		
abetic	Retinal Exam	Diabetio	Foot Exam (not a HEDIS measure, informational only)		
004	CPT: Ophthalmological services: medical examination and evaluation with initiation of diagnostic and treatment program; comprehensive, new patient, 1 or more visits	2028F	CPT II: Foot examination performed (includes examination through visual inspection, sensory exam with monofilament, and pulse examreport when any of the 3 components are completed)		
250	CPT: Fundus photography with interpretation and report		HCPCS: Foot examination performed (includes examination through		
22F	CPT II: Dilated retinal eye exam with interpretation by ophthalmologist or optometrist documented and reviewed; with evidence of retinopathy (DM)	G9226	visual inspection, sensory exam with 10-g monofilament plus testing any one of the following: vibration using 128-Hz tuning fork, pinprick sensation, ankle reflexes, or vibration perception threshold, and pulse exam; report when all of the 3 components are completed)		
23F	CPT II: Dilated retinal eye exam with interpretation by ophthalmologist or optometrist documented and reviewed;				
	without evidence of retinopathy (DM)	Osteoporosis Screening/ Management in Women (OMW, OSW)  Bone Density			
24F	CPT II: 7 standard field stereoscopic retinal photos with interpretation by ophthalmologist or optometrist documented and reviewed; with evidence of retinopathy (DM)	76977	CPT: Ultrasound bone density measurement and interpretation, peripheral site		
	and reviewed, with evidence of retificity (DIVI)		The state of the s		

CPT: Computed tomography, bone mineral density study, 1 or more

sites, axial skeleton (eg, hips, pelvis, spine)

CPT II: 7 standard field stereoscopic retinal photos with

interpretation by **ophthalmologist or optometrist** documented and reviewed; without evidence of retinopathy (DM)

	CPT: Dual-energy X-ray absorptiometry (DXA), bone density study,
77080	or more sites; axial skeleton (eg, hips, pelvis, spine)
77081	CPT: Dual-energy X-ray absorptiometry (DXA), bone density study, 1 c more sites; appendicular skeleton (peripheral) (eg, radius, wrist, heel)
77085	CPT: Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine), including vertebral fracture assessment
77086	CPT: Vertebral fracture assessment via dual-energy X-ray absorptiometry (DXA) - OMW Only
Use of S	pirometry Testing in the Assessment and Diagnosis of COPD (SPR)
Spirome	etry Testing
94010	CPT: Spirometry, including graphic record, total and timed vital capacity, expiratory flow rate measurement(s), with or without maximal voluntary ventilation
94070	CPT: Bronchospasm provocation evaluation, multiple spirometric determinations as in 94010, with administered agents (eg, antigen[s], cold air, methacholine)
94014	CPT: Patient-initiated spirometric recording per 30-day period of time; includes reinforced education, transmission of spirometric tracing, data capture, analysis of transmitted data, periodic recalibration and review and interpretation by a physician or other qualified health care professional
94015	CPT: Patient-initiated spirometric recording per 30-day period of time; recording (includes hook-up, reinforced education, data transmission, data capture, trend analysis, and periodic recalibration)
94016	CPT: Patient-initiated spirometric recording per 30-day period of time; review and interpretation only by a physician or other qualifie health care professional
94375	CPT: Respiratory flow volume loop
Prenatal	and Pospartum Visits (PPC)
Prenata	
59400	CPT: Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care. Total OB care only.
	postpartam card rotat of card
59426	CPT: Antepartum care only; 7 or more visits
	CPT: Antepartum care only; 7 or more visits
Postpar	CPT: Antepartum care only; 7 or more visits tumVisits
Postpar 59430 59510	CPT: Antepartum care only; 7 or more visits tumVisits CPT: Postpartum care only (separate procedure) CPT: Routine obstetric care including antepartum care, cesarean
Postpar 59430 59510	CPT: Antepartum care only; 7 or more visits tumVisits CPT: Postpartum care only (separate procedure) CPT: Routine obstetric care including antepartum care, cesarean delivery, and postpartum care. Total OB care only.
Postpar 59430 59510 HIV Vira	CPT: Antepartum care only; 7 or more visits tumVisits CPT: Postpartum care only (separate procedure) CPT: Routine obstetric care including antepartum care, cesarean delivery, and postpartum care. Total OB care only. Load Suppression (VLS)
Postpar 59430 59510 HIV Vira 3494F	CPT: Antepartum care only; 7 or more visits  tumVisits  CPT: Postpartum care only (separate procedure)  CPT: Routine obstetric care including antepartum care, cesarean delivery, and postpartum care. Total OB care only.  Load Suppression (VLS)  CPT: CD4+ cell count <200 cells/mm3 (HIV)
Postpar 59430 59510 HIV Vira 3494F 3496F	CPT: Antepartum care only; 7 or more visits  tumVisits  CPT: Postpartum care only (separate procedure)  CPT: Routine obstetric care including antepartum care, cesarean delivery, and postpartum care. Total OB care only.  Load Suppression (VLS)  CPT: CD4+ cell count <200 cells/mm3 (HIV)  CPT: CD4+ cell count => 500 cells/mm3 (HIV)
Postpar 59430 59510 HIV Vira 3494F 3496F 3497F	CPT: Antepartum care only; 7 or more visits  tumVisits  CPT: Postpartum care only (separate procedure)  CPT: Routine obstetric care including antepartum care, cesarean delivery, and postpartum care. Total OB care only.  Load Suppression (VLS)  CPT: CD4+ cell count <200 cells/mm3 (HIV)  CPT: CD4+ cell count => 500 cells/mm3 (HIV)  CPT: CD4+ cell percentage <15% (HIV)

## Statin Therapy for Diabetic and/or Cardiovascular Disease Patients (SPC, SPD, SUPD) HCPCS: Patients who are currently statin therapy users or received

G9664 an order (prescription) for statin therapy (for reference only; not in HEDIS value set)

### BEHAVIORAL HEALTH

Psychiatric Evaluation (ADD, IET, FMC, FUA, FUH, FUM)
90791 CPT: Psychiatric diagnostic evaluation
90792 CPT: Psychiatric diagnostic evaluation with medical services

Adherence to Antipsychotic Medication for Individuals with Schizophrenia (SAA)		
J0401 HCPCS: Injection, aripiprazole, extended release, 1 mg		
J1631 <b>HCPCS:</b> Injection, haloperidol decanoate, per 50 mg		
J1943	1943 <b>HCPCS:</b> Injection, aripiprazole lauroxil, (Aristada Initio), 1 mg	
J1944	HCPCS: Injection, aripiprazole lauroxil, (Aristada), 1 mg	
J2358	HCPCS: Injection, olanzapine, long-acting, 1 mg	
J2426	HCPCS: Injection, paliperidone palmitate extended release, 1 mg	
J2680	HCPCS: Injection, fluphenazine decanoate, up to 25 mg	
J2794	J2794 HCPCS: Injection, risperidone, 0.5 mg	
J2798	HCPCS: Injection, risperidone, (Perseris), 0.5 mg	

## Glucose Test (SSD only - Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications) CPT: Basic metabolic panel (Calcium, ionized) This panel must include

the following: Calcium, ionized (82330) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Potassium (84132) Sodium (84295) Urea Nitrogen (BUN) (84520) **CPT:** Basic metabolic panel (Calcium, total) This panel must include the following: Calcium, total (82310) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Potassium (84132) Sodium (84295) Urea nitrogen (BUN) (84520) **CPT:** General health panel This panel must include the following: Comprehensive metabolic panel (80053) Blood count, complete (CBC), automated and automated differential WBC count (85025 or 85027 and 85004) OR Blood count, complete (CBC), automated (85027) and appropriate manual differential WBC count (85007 or 85009) Thyroid stimulating hormone (TSH) (84443) **CPT:** Comprehensive metabolic panel This panel must include the following: Albumin (82040) Bilirubin, total (82247) Calcium, total (82310) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Phosphatase, alkaline (84075) Potassium (84132) Protein, total (84155) Sodium (84295) Transferase, alanine amino (ALT) (SGPT) (84460) Transferase, aspartate amino (AST) (SGOT) (84450) Urea nitrogen (BUN) (84520)

82947 **CPT:** Glucose; quantitative, blood (except reagent strip)

82951 **CPT:** Glucose; tolerance test (GTT), 3 specimens (includes glucose)

82950 **CPT:** Glucose; post glucose dose (includes glucose)

## ♣ HealthCare Partners, IPA

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# HEDIS® Coding Guide

Updated with March 2022 Value Set

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### FREQUENTLY USED CODES

### Annual Wellness Visit

HCPCS: G0438, G0439 (Medicare only) or **CPT**: 99385-99387, 99395-99397

Telephone Calls for Patient Management and Virtual Check-In: POS 11, no modifier required. (For the COVID-19 Public Health Emergency only-New or Established patient)

<b>CPT</b> 99441	established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion
<b>CPT</b> 99442	<b>Telephone evaluation and management</b> service provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion

Telephone evaluation and management service provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion

Telephone evaluation and management service provided to an

Brief communication technology-based service, e.g., virtual checkin, provided to an established patient, not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion (MEDICARE ONLY)

PREV	PREVENTIVE VISITS				
Prevent	ive Medicine Visits (AAP, AWC, W30, WCV - based on age)				
99381	CPT: Initial comprehensive preventive medicine evaluation and management, new pt (age younger than 1 year)				
99382	CPT: Initial comprehensive preventive medicine evaluation and management, new pt (1-4 yrs)				
99383	CPT: Initial comprehensive preventive medicine evaluation and management, new pt (5 - 11 yrs)				
99384	CPT: Initial comprehensive preventive medicine evaluation and management, new pt (12 - 17 yrs)				
99385	CPT: Initial comprehensive preventive medicine evaluation and management, new pt (18-39 yrs)				
99386	CPT: Initial comprehensive preventive medicine evaluation and management, new pt (40-64 yrs)				
99387	CPT: Initial comprehensive preventive medicine evaluation and management, new pt (65 and older)				
99391	CPT: Periodic comprehensive preventive medicine reevaluation and management, est pt (age younger than 1 year)				
99392	CPT: Periodic comprehensive preventive medicine reevaluation and management, est pt (1-4 yrs)				
99393	CPT: Periodic comprehensive preventive medicine reevaluation and management, est pt (5-11 yrs)				
00304	CPT: Periodic comprehensive preventive medicine reevaluation and				

CPT: Periodic comprehensive preventive medicine reevaluation and

management, est pt (12-17 yrs)

management, est pt (18-39 yrs)

99396	CPT: Periodic comprehensive preventive medicine reevaluation and management, est pt (40-64 yrs)			
99397	CPT: Periodic comprehensive preventive medicine reevaluation and management, est pt (65 and older)			
	re Medicine Visits (AAP)			
Counsel	ing Services			
99401	CPT: Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (15 min)			
Risk Fac	tor and Behavioral Change Modification			
99402	<b>CPT:</b> Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (30 min)			
99403	CPT: Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (45 min)			
99411	CPT: Preventive medicine counseling and/or risk factor reduction intervention(s) provided to individuals in a group setting (30 min)			
99412	CPT: Preventive medicine counseling and/or risk factor reduction intervention(s) provided to individuals in a group setting (60 min)			
Mall Chil	d Visits in the First 30 Months of Life (W30) and Child and			
	ent Well-Care Visits (AWC)			
Z00.110	ICD 10: Health examination for newborn under 8 days old			
Z00.111	ICD 10: Health examination for newborn 8 to 28 days old			
Z00.121	ICD 10: Encounter for routine child health examination with abnormal findings			
Z00.129	ICD 10: Encounter for routine child health examination without abnormal findings			
99461	CPT: Initial care, per day, for evaluation and management of normal newborn infant seen in other than hospital or birthing center			
Outpatie	nt Home E&M (AAP)			
99341	CPT: E&M - Home visit, new pt (20 min)			
99342	CPT: E&M - Home visit, new pt (30 min)			
99343	CPT: E&M - Home visit, new pt (45 min)			
99344	CPT: E&M - Home visit, new pt (60 min)			
99345	CPT: E&M - Home visit, new pt (75 min)			
99347	CPT: E&M - Home visit, est pt (15 min)			
99348	CPT: E&M - Home visit, est pt (25 min)			
99349	CPT: E&M - Home visit, est pt (40 min)			
99350	CPT: E&M - Home visit, est pt (60 min)			

CPT: Office or other outpatient visit, new pt (15-29 min)

CPT: Office or other outpatient visit, new pt (30-44 min) CPT: Office or other outpatient visit, new pt (45-59 min)

CPT: Office or other outpatient visit, new pt (60-74 min)

CPT: Office or other outpatient visit, est pt (20-29 min)

CPT: Office or other outpatient visit, est pt (30-39 min)

**CPT:** Office or other outpatient visit, est pt (40-54 min)

physician or other Healthcare professional **CPT:** Office or other outpatient visit, est pt (10-19 min)

CPT: Office or other outpatient visit, est pt that may not require

Outpatient E&M (AAP)

Domicilia	ry Care, Rest Home, Assisted Living (AAP)		
99324	CPT: Domiciliary or rest home visit, new pt (20 min)		
99325	CPT: Domiciliary or rest home visit, new pt (30 min)		
99326	CPT: Domiciliary or rest home visit, new pt (45 min)		
99327	CPT: Domiciliary or rest home visit, new pt (60 min)		
99328	CPT: Domiciliary or rest home visit, new pt (75 min)		
99334	CPT: Domiciliary or rest home visit, est pt (15 min)		
99335	CPT: Domiciliary or rest home visit, est pt (25 min)		
99336	CPT: Domiciliary or rest home visit, est pt (40 min)		
99337	CPT: Domiciliary or rest home visit, est pt (60 min)		
PREVI	ENTIVE SCREENINGS		
	ssessment and Counseling for Nutrition and Physical Activity for		
	/ Adolescents (WCC)		
	entile - Pediatric (WCC)		
3008F	CPT II: Body Mass Index (BMI), documented - use with ICD 10 code		
Z68.51	ICD 10: BMI pediatric, less than 5th percentile for age		
Z68.52	ICD 10: BMI pediatric, 5th percentile to less than 85th percentile for age		
Z68.53	ICD 10: BMI pediatric, 85th percentile to less than 95th percentile for age		
Z68.54	ICD 10: BMI pediatric, greater than or equal to 95th percentile for age		
Nutrition	Counseling (WCC)		
Z71.3	ICD 10: Dietary counseling and surveillance		
97802	CPT: Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with patient, each 15 min		
97803	CPT: Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 min		
97804	CPT: Medical nutrition therapy; group (2 or more individual(s)), each 30 minutes		
Physical	Activity Counseling (WCC)		
G0447	HCPCS: Face-to-face behavioral counseling for obesity, 15 minutes		
Z02.5	ICD 10: Encounter for examination for participation in sport		
Z71.82	ICD 10: Exercise counseling		
	<u> </u>		
	nt Preventive Care Measures (ADL) NYS-Specific QARR measure only		
Sexual A	ctivity Counseling		
Z30.0	ICD 10: Encounter for general counseling and advice on contraception		
Z30.09	ICD 10: Encounter for other general counseling and advice on contraception		
Z70.3	ICD 10: Counseling related to combined concerns regarding sexual attitude, behavior and orientation		
Z71.7	ICD 10: Human immunodeficiency virus (HIV) counseling		
Z72.51	ICD 10: High risk heterosexual behavior		
G9818	HCPCS: Documentation of sexual activity		
Depress	ion .		
Z13.31	ICD 10: Encounter for screening for depression		
G8431	HCPCS: Screening for depression is documented as being positive and a follow-up plan is documented		
	HCPCS: Screening for depression is documented as negative,		

Tobacco	Counseling				
Z71.6	ICD 10: Tobacco abuse counseling				
	***Use additional code for nicotine dependence (F17)				
	ce / Alcohol Counseling				
Z71.41	ICD 10: Alcohol abuse counseling and surveillance of alcoholic				
Z71.51	ICD 10: Drug abuse counseling and surveillance of drug abuser  ***Use additional code for drug abuse or dependence (F11-F16, F18-F19)				
Advance	d Care Planning (ACP)				
1123F	CPT II: Advance Care Planning discussed and documented advance care plan or surrogate decision maker documented in the medical record (DEM) (GER, Pall Cr)				
1124F	CPT II: Advance Care Planning discussed and documented in the medical record, patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan (DEM) (GER, Pall Cr)				
1157F	<b>CPT II:</b> Advance care plan or similar legal document present in the medical record				
1158F	CPT II: Advance care planning discussion documented in the medical record				
Z66	ICD 10: Do not resuscitate				
99497	<b>CPT:</b> Advance care planning including explanation and discussion of advance directives and completion of such forms; first 30 minutes, face-to-face with the patient, family member(s), and/or surrogate				
S0257	HCPCS: Counseling and discussion regarding advance directives or end of life care planning and decisions, with patient and/or surrogate (list separately in addition to code for appropriate evaluation and management service)				
Breast Ca	ncer Screening (BCS)				
3014F	CPT II: Screening mammography results documented and reviewed (for reference only; not in HEDIS value set)				
77065	CPT: Diagnostic mammography, including computer-aided detection (CAD) when performed; unilateral				
77066	CPT: Diagnostic mammography, including computer-aided detection (CAD) when performed; bilateral				
77067	CPT: Screening mammography, bilateral (2-view study of each breast), including computer-aided detection (CAD) when performed				
Z90.11	ICD 10: Acquired absence of right breast and nipple				
Z90.12	ICD 10: Acquired absence of left breast and nipple				
Z90.13	ICD 10: Acquired absence of bilateral breasts and nipples				
Cardiac F	Rehabilitation (CRE)				
oaraido i	CPT: Physician or other qualified health care professional services				
93797	for outpatient cardiac rehabilitation; without continuous ECG monitoring (per session)				
93798	<b>CPT:</b> Physician or other qualified health care professional services for outpatient cardiac rehabilitation; with continuous ECG monitoring (per session)				
G0422	HCPCS: Intensive cardiac rehabilitation; with or without continuous ECG monitoring with exercise, per session				
G0423	HCPCS: Intensive cardiac rehabilitation; with or without continuous ECG monitoring; without exercise, per session				

ing	Care for t	he Older Adults (COA)		
Tobacco abuse counseling	COA - Me	dication Review (both codes required)		
dditional code for nicotine dependence (F17)	1159F	CPT II: Medication list documented in medical record		
ol Counseling	1160F	CPT II: Review of all medications by a prescribing practitioner or		
Alcohol abuse counseling and surveillance of alcoholic		clinical pharmacist (such as prescriptions, OTCs, herbal therapies		
Drug abuse counseling and surveillance of drug abuser		and supplements) documented in the medical record		
dditional code for drug abuse or dependence (F11-F16, F18-F19)		n Assessment		
inning (ACP)	1125F	CPT II: Pain severity quantified; pain present		
dvance Care Planning discussed and documented	1126F	CPT II: Pain severity quantified; no pain present		
care plan or surrogate decision maker documented in the record (DEM) (GER, Pall Cr)		ng High Blood Pressure (CBP)		
dvance Care Planning discussed and documented in the	Systolic 3074F	ODT III Most recent a atalia blood pressure + 120 mm Lla		
record, patient did not wish or was not able to name a	3074F 3075F	CPT II: Most recent systolic blood pressure < 130 mm Hg		
e decision maker or provide an advance care plan (DEM)		CPT II: Most recent systolic blood pressure 130-139 mm Hg		
ll Cr)	3077F	<b>CPT II:</b> Most recent systolic blood pressure ≥ 140 mm Hg		
dvance care plan or similar legal document present in the	Diastolic			
record	3078F	CPT II: Most recent diastolic blood pressure < 80 mm Hg		
dvance care planning discussion documented in the record	3079F	CPT II: Most recent diastolic blood pressure 80-89 mm Hg		
	3080F	<b>CPT II:</b> Most recent diastolic blood pressure ≥ to 90 mm		
Do not resuscitate	Cervical (	Cancer Screening (CCS)		
vance care planning including explanation and discussion ce directives and completion of such forms; first 30 minutes,		Cytology		
ce with the patient, family member(s), and/or surrogate		HCPCS: Screening cytopathology, cervical or vaginal (any		
life care planning and decisions, with patient and/ ate (list separately in addition to code for appropriate	G0144	reporting system), collected in preservative fluid, automated thin layer preparation, with screening by automated system, under physician supervision		
ening (BCS) creening mammography results documented and	G0145	HCPCS: Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with screening by automated system and manu rescreening under physician supervision		
(for reference only; not in HEDIS value set) gnostic mammography, including computer-aided	88164	CPT: Cytopathology, slides, cervical or vaginal (the Bethesda System); manual screening under physician supervision		
n (CAD) when performed; unilateral gnostic mammography, including computer-aided n (CAD) when performed; bilateral	88165	<b>CPT:</b> Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and rescreening under physician supervision		
eening mammography, bilateral (2-view study of each ncluding computer-aided detection (CAD) when performed	88166	CPT: Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted rescreening under physician supervision		
Acquired absence of right breast and nipple Acquired absence of left breast and nipple Acquired absence of bilateral breasts and nipples	88167	CPT: Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted		
		rescreening using cell selection and review under physician supervision		
rsician or other qualified health care professional services tient cardiac rehabilitation; without continuous ECG	88174	CPT: Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; screening by automated system, under physician supervision		
vsician or other qualified health care professional services stient cardiac rehabilitation; with continuous ECG ng (per session)	88175	CPT: Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; with screening by automated system and manual rescreening or review, under physician supervision		
Intensive cardiac rehabilitation; with or without continuous nitoring with exercise, per session	Z90.710	ICD10: Acquired absence of both cervix and uterus		
Intensive cardiac rehabilitation; with or without continuous nitoring; without exercise, per session	Z90.712	ICD10: Acquired absence of cervix with remaining uterus		

		CT Colo	noc
	CPT: Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), high-risk types (eq. 16, 18, 31, 33, 35,	74261	C
	39, 45, 51, 52, 56, 58, 59, 68)  CPT: Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), types 16 and 18 only, includes type	74262	C
	45, if performed	74263	in
/d	ia Screening in Women (CHL)	Colonos	_
	CPT: Culture, chlamydia, any source CPT: Infectious agent antigen detection by immunofluorescent technique; Chlamydia trachomatis	G0105	H
	CPT: Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent	G0121	H ne
	assay [ELISA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative, multiple-step method; Chlamydia trachomatis	Lead Sci	
	CPT: Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, direct probe technique	<b>Lead Te</b> 83655	st C
	CPT: Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, amplified probe technique	Transitio	
	CPT: Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, quantification	1111F	m
	CPT: Infectious agent antigen detection by immunoassay with direct optical observation; Chlamydia trachomatis	IMMU Vaccines	
ota	al Cancer Screening (COL)	vaccines	IC
	al Cancer Screening	Z23	Н
	CPT II: Colorectal cancer screening results documented and	G0008	Н
Эс	reviewed (for reference only; not in HEDIS value set) cult Blood Test (FOBT)	90630	C
	HCPCS: Colorectal cancer screening; fecal occult blood test, immunoassay, 1-3 simultaneous determinations	90656	C
	CPT: Blood, occult, by peroxidase activity (eg, guaiac.) qualitative; consecutive collected specimens with single determination, (ie, patient was provided 3 cards or single triple card for consecutive collection)	90657	<b>C</b>
	CPT: Blood, occult, by fecal hemoglobin determination by	90660	С
e s	immunoassay, qualitative, feces, 1-3 simultaneous determinations  Sigmoidoscopy Procedures  CPT: Sigmoidoscopy, flexible; diagnostic, including collection of	90662	er in
	specimen(s) by brushing or washing, when performed (separate procedure)  CPT: Sigmoidoscopy, flexible; with directed submucosal	90672	C
	injection(s), any substance		С
	CPT: Sigmoidoscopy, flexible; with decompression (for pathologic distention) (eg, volvulus, megacolon), including placement of decompression tube, when performed	90673	re ar
	CPT: Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	90674	d
Α	HCPCS: Colorectal cancer screening; flexible sigmoidoscopy	90685	C
-	CPT: Oncology (colorectal) screening, quantitative real-time target		C
	and signal amplification of 10 DNA markers (KRAS mutations, promoter methylation of NDRG4 and BMP3) and fecal hemoglobin,	90686	pı
	utilizing stool, algorithm reported as a positive or negative result	90687	d

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CT Colonography				
74261	<b>CPT:</b> Computed tomographic (CT) colonography, diagnostic, including image postprocessing; without contrast material			
74262	CPT: Computed tomographic (CT) colonography, diagnostic, including image postprocessing; with contrast material(s) including non-contrast images, if performed			
74263	<b>CPT:</b> Computed tomographic (CT) colonography, screening, including image postprocessing			
Colonos	сору			
G0105	HCPCS: Colorectal cancer screening; colonoscopy on individual at high risk			
G0121	HCPCS: Colorectal cancer screening; colonoscopy on individual not meeting criteria for high risk			
	eening in Children (LSC)			
Lead Tes				
83655	CPT: Lead			
Transition	ns of Care: Medication Reconciliation Post Discharge (TRC)			
1111F	CPT II: Discharge medications reconciled with the current medication list in outpatient medical record			
IMMU	NIZATIONS			
Vaccines	and Administration			
Z23	ICD 10: Encounter for immunization (for reference only; not in HEDIS value set)			
G0008	HCPCS: Administration of influenza virus vaccine			
90630	CPT: Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, for intradermal use			
90656	<b>CPT:</b> Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, 0.5 mL dosage, for intramuscular use			
90657	CPT: Influenza virus vaccine, trivalent (IIV3), split virus, 0.25 mL dosage, for intramuscular use			
90660	CPT: Influenza virus vaccine, trivalent, live (LAIV3), for intranasal use			
90662	<b>CPT:</b> Influenza virus vaccine (IIV), split virus, preservative free, enhanced immunogenicity via increased antigen content, for intramuscular use			
90672	CPT: Influenza virus vaccine, quadrivalent, live (LAIV4), for intranasal use			
90673	CPT: Influenza virus vaccine, trivalent (RIV3), derived from recombinant DNA, hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use			
90674	CPT: Influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, for intramuscular use			
90685	CPT: Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.25 mL, for intramuscular use			
90686	CPT: Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.5 mL dosage, for intramuscular use			
90687	CPT: Influenza virus vaccine, quadrivalent (IIV4), split virus, 0.25 mL dosage, for intramuscular use			