2023 HEDIS® Gap Closure Tips

HealthCare Partners

This guide is designed to provide you with an overview of the specifications of select quality gap measures. We encourage you to keep these tips handy as a valuable reference to support your efforts in closing gaps in healthcare and improving patient outcomes.

Use the listed CPT II/HCPCS codes in your claim as appropriate for the service(s) provided.

*Note: Only submit codes for services performed/rendered by you during the visit. For example, code for A1c should not be submitted by you unless you performed the service during the visit.

Blood Pressure Control for Patients with Diabetes (BPD)

Required Service:	Codes & Billing Tips:
Adequately controlled BP (<140/90 mm Hg) *As per NCQA: BP must be under 140/90 mm Hg (Both SBP and DBP) to be considered adequately controlled	SBP: **3074F** (under 130) DBP: **3078F** (under 80) **3075F** (130-139) **3079F** (80-89) **3077F** (140 & over) **3080F** (90 & over)

Eligible Population:	Documentation/Action Tips:
Patients 18–75 years of age with diabetes (Type 1 or Type 2)	1. Document BP 2. If BP is greater then 140/90, please recheck BP at the end of the office visit **OR** 3. Schedule a follow up visit for BP recheck as needed 4. Include billing codes when submitting claim for visit

Breast Cancer Screening (BCS)

Required Service:	Codes & Billing Tips:
At least one mammogram to screen for breast cancer between 10/1/2021 to 12/31/2023	**3014F** : Screening mammogram result documented and reviewed *Note

Eligible Population:	Documentation/Action Tips:
Female patients 50-74 years of age	1. Submit mammogram report to HCP 2. Documentation in the medical history section: Mammogram & DOS within the required timeframe such as "mammogram done on 10/1/2022," "mammogram completed in 2023," or "mammogram was performed one year ago" **OR** 3. Documentation of bilateral mastectomy or unilateral mastectomy for both sides on different dates of service in the history section with date(s) of occurrence

Care for Older Adults (COA): Functional Status Assessment

Required Service:	Codes & Billing Tips:
Functional Status Assessment in 2023: 1. Activity of daily living (bathing, dressing, eating, transferring, using toilet, walking—at least 5—or Instrumental), **OR** 2. Instrumental activities of daily living (shopping for groceries, driving or using public transportation, using the telephone, cooking or meal preparation, housework, home repair, laundry, taking medications, handling finances – at least 4) 3. Utilize Care of Older Adult form	Functional Status Assessment: **1170F**

Eligible Population:	Documentation/Action Tips:
Patients 66 years of age or older	1. Performed and document Functional Status Assessment with findings in Office Visit Note **OR** 2. Complete and submit Care of Older Adult form 3. Include billing codes when submitting claim for visit

Care for Older Adults (COA): Medication Review

Required Service:	Codes & Billing Tips:
Review and reconcile medication with patient and update medication list	Medication List: **1159F** Medication Review: **1160F**

Eligible Population:	Documentation/Action Tips:
Patients 66 years of age or older	Perform and document Medication Review in office visit note (2023), please include: 1. Current medication list 4. Complete and submit Care of Older Adult form 2. Review medication list and document 5. Include billing codes when submitting claim for visit 3. Date and sign (full name and credential)

Care for Older Adults(COA): Pain Assessment

Required Service:	Codes & Billing Tips:
Perform Pain Assessment in 2023	Pain Assessment: Pain Present: **1125F** No Pain: **1126F**

Eligible Population:	Documentation/Action Tips:
Patients 66 years of age or older	1. Perform and document Pain Assessment and findings in Office Visit Note **OR** 2. Complete and submit Care of Older Adult form 3. Include billing codes when submitting claim for visit

Colorectal Cancer Screening (COL)

Required Service:	Codes & Billing Tips:
One or more screenings for colorectal cancer as follows: 1. Colonoscopy (2014 - 2023) 4. Cologuard/FIT DNA (2021 - 2023) 2. Sigmoidoscopy (2019 - 2023) 5. FOBT(2023) 3. CT Colonography (2019 - 2023)	**3017F** Colorectal cancer screening results documented and reviewed *Note

Eligible Population:	Documentation/Action Tips:
Patients 45-75 years of age	1. Submit reports for one or more of the mentioned screenings during the specified timeframes to HCP 2. Documentation in medical history, problem list or health maintenance section when the colorectal cancer screening was performed including the type of screening within required time frame such as "Colonoscopy completed in 2015" or "Cologuard was done 1 year ago" **OR** 3. Documentation of colorectal cancer or a total colectomy with date(s) of occurrence

Controlling High Blood Pressure (CBP)

Required Service: Adequately controlled BP (<140/90 mm Hg) *As per NCQA: BP must be under 140/90 mm Hg (Both SBP and DBP) to be considered adequately controlled	Codes & Billing Tips:	
	SBP: **3074F** (under 130) **3075F** (130-139) **3077F** (140 & over)	DBP: **3078F** (under 80) **3079F** (80-89) **3080F** (90 & over)

Eligible Population: Patients 18–85 years of age	Documentation/Action Tips: 1. Document BP 2. If BP is greater than140/90, please recheck BP at the end of the office visit **OR** 3. Schedule a follow-up visit for BP recheck as needed 4. Include billing codes when submitting claim for visit

Eye Exam for Patients With Diabetes (EED)

Required Service: Retinal Eye exam performed by an optometrist or ophthalmologist in 2022-2023 Eye Exam completed in 2022 must have negative retinopathy to meet measure requirement Patient with known history of Retinopathy need to be seen by eye care professionals annually	Codes & Billing Tips: *Note

Eligible Population: Patients 18–75 years of age with diabetes (Type 1 or Type 2)	Documentation/Action Tips: 1. Submit eye exam report or consultation by an optometrist or ophthalmologist in 2022 or 2023 2. Documentation of eye exam in patient's note such as "Eye exam completed in 2022 and negative for retinopathy"

Hemoglobin A1c Control for Patients With Diabetes (HBD)

Required Service: Hemoglobin A1c Test (2023) Adequately controlled A1c is <8.0%	Codes & Billing Tips: **3044F**: HgbA1c < 7 % **3051F**: HgbA1c 7 - 7.9 % **3052F**: HgbA1c 8 - 9 % Only submit codes of A1c if test performed at point of care

Eligible Population: Patients 18–75 years of age with diabetes (Type 1 or Type 2)	Documentation/Action Tips: 1. Submit most recent 2023 A1c lab report to HCP **OR** 2. Documentation of A1c results with date of test in patient's progress note

Kidney Health Evaluation for Patients With Diabetes (KED)

Required Service: Estimated glomerular filtration rate (eGFR), and urine albumin-creatinine ratio (uACR) in 2023	Codes & Billing Tips: *Note

Eligible Population: Patients 18–85 years of age with diabetes (Type 1 or Type 2)	Documentation/Action Tips: 1. Submit lab report(s) to HCP 2. Document KED results and DOS in progress note

Medication Adherence (Cholesterol, Diabetes, & Hypertension)

Required Service: Adhere to their medication at least 80% of the time in the measurement period	Codes & Billing Tips: Prescribe eligible medications for compliance

Eligible Population: Patients 18 and older with at least two fills in 2023	Documentation/Action Tips: 1. Review electronic medical records (EMR) for adherence patterns 2. Consider mail order, auto-refill, or switching from 30-day to 90-day prescription with at least one refill

Osteoporosis Management in Women Who Had a Fracture (OMW)

Required Service: Female patients who suffered a fracture and who had either a bone mineral density (BMD) test or prescription for a drug to treat osteoporosis in the six months after the fracture	Codes & Billing Tips: *Note

Eligible Population: Patients 67–85 years of age with S/P fracture: a bone mineral density (BMD) test, or prescription for a drug to treat osteoporosis within 6 months of fracture	Documentation/Action Tips: 1. Refer for Bone Mineral Density Test; obtain and submit report to HCP 2. If prescribed, document Osteoporosis Drug Treatment in the current medication list

Statin Therapy for Patients with Cardiovascular Disease (SPC)

Required Service: Dispensed at least one high-intensity or moderate-intensity statin medication and remained on a high-intensity or moderate-intensity statin medication for at least 80% of the treatment period during 2023	Codes & Billing Tips: *Note

Eligible Population: Male patients 21–75 years of age Female patients 40–75 years of age Both with atherosclerotic cardiovascular disease (ASCVD)	Documentation/Action Tips: Documentation of the statin and dosage patient is prescribed in note or in medication list **Note**: This measure is based on pharmacy claims – please encourage your patient to pick up his/her prescription and refill timely, and assess medication adherence at subsequent visits

Statin Use in Persons with Diabetes (SUPD)

Required Service: Dispensed at least two diabetes medication fills and received statin medication fill during 2023	Codes & Billing Tips: *Note

Eligible Population: Patients 40–75 years old who were dispensed at least two diabetes medication fills and received statin medication fill during 2023	Documentation/Action Tips: Documentation of the statin and dosage patient is prescribed in note or in medication list **Note**: This measure is based on pharmacy claims – please encourage your patient to pick up his/her prescription, refill timely, and assess medication adherence at subsequent visits