

**Medicare Advantage Prescription Plans (MAPD) & SNP Plans
2019 HEDIS AND FIVE-STAR QUALITY MEASURES REFERENCE GUIDE**



HEDIS STAR MEASURE AND REQUIREMENTS

DOCUMENTATION NEEDED

CPT/CPTII CODES

<p>Annual Wellness Exam Measure ID: AHA, PPE, COA <u>Description:</u> <i>One Annual Wellness Visit documented</i> <u>Documentation Requirements:</u> Measurement Year Lines: Medicare Age: 18yrs & Older</p>	<p>Medicaid and Medicare: One or more ambulatory or preventive care visits during the measurement year.</p>	<p>18-39 yrs old: 99385, 99395 40-64 yrs old: 99386, 99396 65+: 99387, 99397 Initial NEW to Medicare: G0402 Annual Wellness: G0438, G0439 ICD-10: Z00.00, Z00.01</p>
<p>Adult BMI Assessment Measure ID: ABA <u>Description:</u> <i>Percentage of body mass index (BMI) documented during the measurement year.</i> <u>Documentation Requirements:</u> EVERY VISIT Star Weight: 1 Lines: Medicare Age: 18yrs - 74yrs</p>	<p>To be calculated and documented at every visit. For members younger than 18, documentation must include height and weight and be represented as a percentile. EXCLUSION: Members diagnosed as pregnant during the measurement year or year prior.</p>	<p>ICD-10 Codes Members 18 yrs & older: 19 or less: Z68.1 - 20-20.9: Z68.20 21-21.9: Z68.21 - 22-22.9: Z68.22 23-23.9: Z68.23 - 24-24.9: Z68.24 25-25.9: Z68.25 - 26-26.9: Z68.26 27-27.9: Z68.27 - 28-28.9: Z68.28 29-29.9: Z68.29 - 30-30.9: Z68.30 31-31.9: Z68.31 - 32-32.9: Z68.32 33-33.9: Z68.33 - 34-34.9: Z68.34 35-35.9: Z68.35 - 36-36.9: Z68.36 37-37.9: Z68.37 - 38-38.9: Z68.38 39-39.9: Z68.39 - 40-44.9: Z68.41 50-59.9: Z68.43 - 60-69.9: Z68.44 70 or greater: Z68.45 Members younger than 20: Z68.51- Z68.54</p>
<p>Blood Pressure Control Measure ID: CBP or CDC9 <u>Description:</u> <i>BP reading taken in the office. Compliant BP of Systoli >140, Diastolic>90 for hypertensive & diabetic patients.</i> <u>Documentation Requirements:</u> EVERY VISIT Star Weight: 1 Lines: Medicare Age: 18yrs - 75yrs</p>	<ul style="list-style-type: none"> • Progress notes • Vitals sheet 	<p>Systolic <130 3074F Systolic 130-139 3075F Systolic >=140 3077F Diastolic <80 3078F Diastolic 80-89 3079F Diastolic >=90 3080F</p>
<p>Care for Older Adults MEDICATION REVIEW & LISTING Measure ID: COA <u>Description:</u> <i>Medication list must be signed and listed</i> <u>Documentation Requirements:</u> Measurement Year Star Weight: 1 Lines: Medicare Age: 65yrs & Older</p>	<ul style="list-style-type: none"> • Health history & physical • Medication list • Progress notes • SOAP notes <p>Documentation that the medications aren't tolerated isn't an exclusion</p>	<p>1159F: Medication Listing 1160F: Medication Review</p>

**Medicare Advantage Prescription Plans (MAPD) & SNP Plans
2019 HEDIS AND FIVE-STAR QUALITY MEASURES REFERENCE GUIDE**



HEDIS STAR MEASURE AND REQUIREMENTS

DOCUMENTATION NEEDED

CPT/CPTII CODES

<p>Care for Older Adults ADVANCED CARE PLANNING Measure ID: COA <u>Description:</u> <i>Evidence of an advance care plan and Advanced directive discussion</i> <u>Documentation Requirements:</u> Measurement Year Star Weight: 1 Lines: Medicare Age: 65yrs & Older</p>	<ul style="list-style-type: none"> • Advance care plan or discussion of one • Health history & physical • Home health records • Progress notes • Skilled nursing facility minimum data set (MDS) form • SOAP notes 	<p>1157F: Advance Planning on Record 1158F: Advance Planning Discussed & documented</p>
<p>Care for Older Adults FUNCTIONAL STATUS ASSESSMENT Measure ID: COA <u>Description:</u> <i>Assessment of atleast 4 IADL's</i> <u>Documentation Requirements:</u> Measurement Year Star Weight: 1 Lines: Medicare Age: 65yrs & Older</p>	<ul style="list-style-type: none"> • Functional status assessment forms • Health history & physical • Occupational therapy notes • Physical therapy notes • Progress notes • Skilled nursing facility minimum data set (MDS) form • SOAP notes 	<p>1170F</p>
<p>Care for Older Adults PAIN ASSESSMENT Measure ID: COA <u>Description:</u> <i>Notation of "no pain" or "no pain" in the medical record</i> <u>Documentation Requirements:</u> Measurement Year Star Weight: 1 Lines: Medicare Age: 65yrs & Older</p>	<ul style="list-style-type: none"> • Health history & physical • Home health records • Occupational therapy notes • Pain assessment forms • Physical therapy notes • Progress notes • Skilled nursing facility minimum data set (MDS) form • SOAP notes 	<p>1125F = Pain 1126F = No Pain</p>
<p>Medication Reconciliation Post-Discharge Measure ID: MRP <u>Description:</u> <i>Medication reconciliation documented</i> <u>Documentation Requirements:</u> Visit within 30 days of Hospital discharge Star Weight: 1 Lines: Medicare Age: 18yrs - 75yrs</p>	<ul style="list-style-type: none"> • Progress Notes must clearly state that <u>discharge and current medications were reconciled</u> • Visit must be held within 30 days from date of discharge. 	<p>CPT/CPTII: 1111F - or - Submit completed and signed MRP form</p>

**Medicare Advantage Prescription Plans (MAPD) & SNP Plans
2019 HEDIS AND FIVE-STAR QUALITY MEASURES REFERENCE GUIDE**



HEDIS STAR MEASURE AND REQUIREMENTS

DOCUMENTATION NEEDED

CPT/CPTII CODES

<p>Comprehensive Diabetes Care HbA1c Control Measure ID: CDC</p> <p><u>Description:</u> <i>Diabetes Monitoring - Complete Lab Requisition form and refer to Lab</i></p> <p><u>Documentation Requirements:</u> Measurement Year</p> <p>Star Weight: 3</p> <p>Lines: Medicare Age: 18yrs - 75yrs</p>	<ul style="list-style-type: none"> • A1c, HbA1c, HgbA1c • Glycohemoglobin • Glycohemoglobin A1c • Glycated hemoglobin • Glycosylated hemoglobin • Hemoglobin A1c 	<p>CPT/CPTII: HbA1c <7% = 3044F HbA1c 7 -9% = 3045F *HbA1c >9% = 3046F ** >9% not in-control **</p>
<p>Comprehensive Diabetes Care Microalbumin Measure ID: CDC</p> <p><u>Description:</u> <i>Microalbumin - Complete Lab Requisition form and refer to Lab</i></p> <p><u>Documentation Requirements:</u> Measurement Year</p> <p>Star Weight: 1</p> <p>Lines: Medicare Age: 18yrs - 75yrs</p>	<ul style="list-style-type: none"> • Consultation reports • Lab reports 	<p>CPT/CPTII: 81000-81003, 81005, 82042-82044, 84156, 3060F-3062F,3066F, 4010F</p>
<p>Comprehensive Diabetes Care Eye Exam Measure ID: CDC, DRE</p> <p><u>Description:</u> <i>Diabetes Monitoring - Refer to Optometrist or Ophthalmologist</i></p> <p><u>Documentation Requirements:</u> Positive for Retinopathy = Annually Negative for Retinopathy = Every 2yrs</p> <p>Star Weight: 1</p> <p>Lines: Medicare Age: 18yrs - 75yrs</p>	<ul style="list-style-type: none"> • Bilateral eye enucleation or acquired absence of both eyes • Dilated or retinal eye exam • Fundus photography •Note: the presence or absence of retinopathy must be documented. 	<p>CPT: 67028, 67030, 67031, 67036, 67039-67043,67101, 67105, 67107, 67108, 67110, 67112, 67113, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228, 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92225, 92226, 92227, 92228, 92230, 92235, 92240, 92250, 92260, 99203-99205, 99213-99215, 99242-99245</p> <p>CPTII: 2022F, 2024F,2026F 3072F Low Risk or Negative for Retinopathy 92250 - Fundus Photography</p>
<p>Breast Cancer Screening Measure ID: BCS</p> <p><u>Description:</u> <i>Cancer prevention screening.</i></p> <p><u>Documentation Requirements:</u> Mammogram -Refer to Imaging Center between Oct. 1, 2017, and Dec. 31, 2019</p> <p>Star Weight: 1</p> <p>Lines: Medicare Age: 50yrs - 74yrs</p>	<ul style="list-style-type: none"> • Diagnostic reports • Health history and physical • Radiology Report <p>Exclusion: Bilateral Mastectomy</p>	<p>CPT/CPTII: 77061-77063, 77065-77067 The following codes are valid for DOS prior to 12/31/2017: 77055-77057, G0202, G0204, G0206</p>

**Medicare Advantage Prescription Plans (MAPD) & SNP Plans
2019 HEDIS AND FIVE-STAR QUALITY MEASURES REFERENCE GUIDE**



HEDIS STAR MEASURE AND REQUIREMENTS

DOCUMENTATION NEEDED

CPT/CPTII CODES

Colorectal Cancer Screening

Measure ID: COL

Description:

Cancer prevention screening.

Documentation Requirements:

Colonoscopy = **10yrs**

Colonography/Sigmoidoscopy = **5yrs**

FIT-DNA test = **2yrs**

FOBT = **Every Year (LAB Test)**

Star Weight: 1

Lines:

Medicare

Age:

50yrs - 75yrs

- Consultation reports
- Diagnostic reports
- Health history & physical
- Lab reports
- Pathology reports

CPT/CPTII:

**44388-44394, 44397,
44401-44408, 45355,
45378-45393, 45398**

Fit-DNA Test:

81528, G0464

FOBT:

82270, 82274, G0328

Sigmoidoscopy:

**45330-45335, 45337-45342,
45345-45347, 45349-45350**

**Rheumatoid Arthritis
Management**

Measure ID: DMARD

Description:

Members ages 18 & older who were diagnosed with rheumatoid arthritis & were dispensed at least one ambulatory prescription(s) for a disease-modifying anti-rheumatic drug (DMARD).

Documentation Requirements:

Measurement Year for Diagnosed Patients

Star Weight: 1

Lines:

Medicare

Age:

65yrs & Older

To comply with this measure, a member must have at least one prescription during the measurement year for any of the following:

CPT/CPTII: 4187F

ICD-10 Diagnosis: M06.9

- Sulfasalazine • Cyclophosphamide
- Hydroxychloroquine • Auranofin
- Leflunomide • Methotrexate
- Penicillamine • Abatecept
- Infliximab • Etanercept
- Adalimumab • Anakinra
- Golimumab • Certolizumab
- Rituximab • Azathioprine
- Cyclosporine • Mycophenolate
- Minocycline

**Osteoporosis Management in Women who
Had a Fracture**

Measure ID: OMW

Description:

Women ages 67-85 who suffered a fracture & who had a bone mineral density DEXA Scan or prescription drug to treat osteoporosis within 6mos of fracture.

Documentation Requirements:

Within 6 months of Fracture

Star Weight: 1

Lines:

Medicare

Age:

18yrs and Older

- BMD Test
- Osteoporosis therapies identified through pharmacy data
- Lab results
- Medication list

To comply with this measure, a member must be prescribed at least one of the following medications within 180 days of their discharge for a fracture:

CPT/CPTII:

**76977, 77078, 77080-77082,
77085-77086, G0130**

ICD-10 Diagnosis: M84.40XA

- Alendronate • Alendronate-cholecalciferol • Ibandronate
- Risedronate • Zoledronic acid
- Abaloparatide • Calcitonin
- Denosumab • Raloxifene
- Teriparatide