2020 HEDIS® AT-A-GLANCE: KEY BEHAVIORAL MEASURES

(18 Years and Older)

At WellCare, we value everything you do to deliver quality care for our members – your patients – and to make sure they have a positive healthcare experience. That's why we've created this easy-to-use, informative HEDIS® At-A-Glance Guide. It gives you the tools you need to meet, document and code HEDIS measures. Together, we can provide the care and services our members need to stay healthy and improve quality scores and Star Ratings. This benefits our providers, WellCare and ultimately our members. Please contact your WellCare representative if you need more information or have any questions.

Quality care is a team effort. Thank you for playing a starring role!

*Measurement year 2019

HEDIS Measure	HEDIS Tips	Sample Codes Used
Antidepressant Medication Management (AMM) Members with a diagnosis of major depression and were treated with antidepressant medication, and who remained on an antidepressant medication treatment. Two rates are reported: • Effective Acute Phase Treatment – Members who remained on an antidepressant medication for at least 84 days (12 weeks). • Effective Continuation Phase Treatment – Members who remained on an antidepressant medication for at least 180 days (6 months). Ages: 18 years and older Performed: May 1 of prior measurement year to April 30 of measurement year*	 Be sure to accurately assess and diagnose members through the PHQ-9 screening tool. Rule out other medical or mental health disorders that can produce similar symptoms to that of major depression. Educate your patients on how to take their antidepressant medications. Include the importance of continuing to take the medication even if they begin feeling better and to not stop taking the medication without consulting you first. 	For a complete list of medications and NDC codes, please visit www.ncqa.org. For Medicaid, refer to the Preferred Drug List (PDL) on the state-specific WellCare website. For Medicare, refer to the WellCare Formulary.

This document is an informational resource designed to assist licensed healthcare practitioners in caring for their patients. Healthcare practitioners should use their professional judgment in using the information provided. HEDIS measures are not a substitute for the care provided by licensed healthcare practitioners and patients are urged to consult with their healthcare practitioner for appropriate treatment. HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

www.wellcare.com/Kentucky



HEDIS Measure	HEDIS Tips	Sample Codes Used
Depression Remission or Response for Adolescents and Adults (DRR) Members with a diagnosis of depression and an elevated PHQ-9 score who had a response or remission within 4-8 months of the elevated score. Ages: 12 years and older Performed: Jan. 1–Dec. 31 of measurement year*	 When the PHQ-9 indicates an elevated score, it is important to document follow-up in which the rates reported include: Follow-up PHQ-9 – follow-up PHQ-9 score documented within 5-7 months after the initial elevated PHQ-9 score. Depression Remission – those who achieved remission within 5-7 months after the initial elevated PHQ-9 score. Depression Response – those who showed response within 5-7 months after initial elevated PHQ-9 score. The PHQ-9 assessment does not need to occur during a face-to-face encounter it can be completed over the telephone or through a Web-based portal. 	ICD-10-CM Diagnosis Major Depression and Dysthymia: F32.0-F32.5, F32.9, F33.0-F33.3, F33.40-F33.42, F33.9, F34.1 CPT Code PHQ-9: 96127
Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS) Those with a diagnosis of major depression or dysthymia, who had an outpatient encounter with a PHQ-9 score present in their record in the same assessment period as the encounter. Ages: 12 and older Performed: Jan. 1—Dec. 31 of measurement year*	The use of standardized instruments are useful for identifying meaningful change in clinical outcomes over time. It is recommended to use the PHQ-9, which is a nationally recognized standardized assessment tool.	Major Depression and Dysthymia ICD-10-Dx: F32.0-F32.5, F32.9, F33.0-F33.3, F33.40-F33.42, F33.9, F34.1 Interactive Outpatient Encounter CPT Codes: 90791, 90792, 90832, 90834, 90837, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99510 HCPCS: G0155, G0176, G0177, G0409-G0411, G0463, G0502, G0503, G0507, H0002, H0004, H0031, H0034-H0037, H0039, H0040, H2000, H2001, H2010-H2020, M0064, S0201, S9480, S9484, S9485, T1015

HEDIS Measure	HEDIS Tips	Sample Codes Used
Follow-Up After Hospitalization For Mental Illness (FUH) Members who were discharged following hospitalization for treatment of selected mental illness diagnoses or intentional self-harm and who had a follow-up visit with a mental health practitioner. Two rates are reported: The percentages of discharges for which the member received follow-up within 7 days of discharge. The percentage of discharges for which the member received follow-up within 30 days of discharge. Ages: 6 years and older Performed: Jan. 1–Dec. 1 of measurement year*	 Schedule the 7-day follow-up visit within 5 days of discharge to allow flexibility in rescheduling. If the member's appointment does not occur within the first 7 days post-discharge, please schedule the appointment to occur within 30 days. 	ICD-10-Dx: Use the appropriate code family: F, T CPT Codes: 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99495, 99496, 99510 Telehealth POS: 02 HCPCS: G0155, G0176, G0177, G0409, G0463, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010-H2020, M0064, T1015 CPT Codes: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90870, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 WITH POS: 03, 05, 07, 09, 11-20, 22, 24, 33, 49, 50, 52, 53, 71, 72
Follow-Up After Emergency Department (ED) Visit for Mental Illness (FUM) Members who had an ED visit with a principal diagnosis of mental illness or intentional self-harm who had an outpatient follow-up visit, an intensive outpatient follow-up encounter or partial hospitalization with any practitioner within 30 days and 7 days after the ED visit. Two rates are reported: • The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days). • The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days). Ages: 6 years and older	 Schedule the 7-day follow-up visit within 5 days to allow flexibility in rescheduling. If the member's appointment does not occur within the first 7 days post-ED visit, please schedule the appointment to occur within 30 days post-ED visit. 	ICD-10-Dx: Use the appropriate code family: F, T STAND-ALONE VISITS CPT Codes: 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99510 Telehealth POS: 02 HCPCS: G0155, G0176, G0177, G0409, G0463, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010-H2020, M0064, T1015 FOLLOW-UP GROUP 1 WITH POS CPT Codes: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90870, 90875, 90876 POS: 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 52, 53, 71, 72

Performed: Jan. 1-Dec. 1 of

measurement year*

FOLLOW-UP GROUP 2 WITH POS

CPT Codes: 99221-99223,

99251-99255 **POS**: 52, 53

99231-99233, 99238, 99239,

HEDIS Measure	HEDIS Tips	Sample Codes Used
Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA) Members who had an ED visit with a principal diagnosis of alcohol or other drug (AOD) abuse or dependence and who had a follow- up visit for AOD to include: an outpatient follow-up visit, intensive outpatient or partial hospitalization encounter with any practitioner. Two rates are reported: • The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days). • The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days). Ages: 13 years and older Performed: Jan. 1-Dec. 1 of measurement year*	 Schedule the 7-day follow-up visit within 5 days to allow flexibility in rescheduling. If the member's appointment does not occur within the first 7 days post-ED visit, please schedule the appointment to occur within 30 days post-ED visit. 	ICD-10-Dx: Use the appropriate code family: F
FIRST YEAR MEASURE Follow-Up After High Intensity Care for Substance Use Disorder (FUI): The percentage of acute inpatient hospitalizations, residential treatment or detoxification visits for a diagnosis of substance use disorder among members 13 years of age and older that result in a follow-up visit or service for substance use disorder. Two rates are reported: 1. The percentage of visits or	Do NOT count follow-up visits which occur on the same day as the discharge/visit. • Schedule the 7-day follow-up visit within 5 days to allow flexibility in rescheduling. Involve the member's care giver regarding the follow up after the visit or discharge. • If the member's appointment does not occur within the first 7 days post-visit/discharge, please schedule the appointment to occur within	CPT: 90791, 90792, 90832-90840, 90845, 90847, 90849, 90853, 90875, 90876, 98960-98962, 99078, 99201-99205, 99211-99215, 99221-99223, 99231-99233, 99238, 99239, 99241-99245, 99251-99255, 99341-99345, 99347-99350, 99384-99387, 99304-99397, 99401-99404, 99408, 99409, 99411, 99412, 99510 Online Assessments: 99869, 99444 Telephone Visits: 98966-98968, 99441, 99443

the appointment to occur within 30 days post-visit/discharge.

discharges for which the member

received follow-up for substance

discharges for which the member

received follow-up for substance

use disorder within the 7 days after

use disorder within the 30 days

after the visit or discharge.

2. The percentage of visits or

the visit or discharge.

Performed: Jan. 1-Dec. 1 of the

Ages: 13 years and older

measurement year.

Telephone Visits: 98966-98968, 99441-99443

HCPCS: G0155, G0176, G0177, G0396, G0397, G0409-G0411, G0443, G0463, H0001, H0002, H0004, H0005, H0007, H0015-H0019, H0022, H0031, H0034-H0040, H0047, H2000, H2001, H2010-H2020, H2035, H2036, J0572-J0575, M0064, S0201, S9480, S9484, S9485, T1006, T1015, T2048

With POS: 02, 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 52, 53, 57, 71, 72

HEDIS Measure	HEDIS Tips	Sample Codes Used	
Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET) Those adolescent and adult members with a new episode of alcohol or other drug (AOD) use, or dependence, who received the following: Initiation of AOD Treatment — Members who initiated treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter,	 Schedule the initial 14-day follow-up visit within 10 days of new AOD diagnosis to allow flexibility in rescheduling. At the end of the initial follow-up appointment, schedule 2 more follow-up appointments to occur within 34 days of the initial follow-up appointment. When treating a member for issues related to an alcohol or other drug dependence diagnosis, code that diagnosis on every claim. 	 Schedule the initial 14-day follow-up visit within 10 days of new AOD diagnosis to allow flexibility in rescheduling. At the end of the initial follow-up appointment, schedule 2 more follow-up appointments to occur within 34 days of the initial follow-up appointment. When treating a member for issues related to an alcohol or other drug dependence diagnosis, code that diagnosis on every claim. 	ICD-10-Dx: Use the appropriate code family: F CPT Codes: 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99408, 99409, 99411, 99412, 99510 Telephone Visits: 98966-98968, 99441-99443 Telehealth POS: 02
or partial hospitalization, telehealth or medication treatment within 14 days of the diagnosis. • Engagement of AOD Treatment – Members who initiated treatment and who had two or more additional AOD services or medication treatment within 34 days of the initiation visit. Ages: 13 years and older Performed: Jan. 1–Nov. 13 of measurement year*			Online Assessment: 98969, 99444 AOD Medication Treatment: H0020, H0033, J0570-J0575, J2315, S0109, Q9991, Q9992 HCPCS: G0155, G0176, G0177, G0396, G0397, G0409-G0411, G0443, G0463, H0001, H0002, H0004, H0005, H0007, H0015, H0016, H0022, H0031, H0034-H0037, H0039, H0040, H0047, H2000, H2001, H2010-H2020, H2035, H2036, M0064, S0201, S9480, S9484, S9485, T1006, T1012, T1015
		Initiation Phase	
		CPT Codes: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876 WITH POS: 03, 05, 07, 09, 11-20,	
		22, 33, 49, 50, 52, 53, 57, 71, 72	
		Engagement Phase	
		CPT Codes: 99221-99223, 99231-99233, 99238, 99239, 99251-99255	
		WITH POS : 52, 53	

HEDIS Measure	HEDIS Tips	Sample Codes Used
Pharmacotherapy for Opioid Use Disorder (POD): The percentage of new opioid use disorder (OUD) pharmacotherapy events with OUD pharmacotherapy for 180 or more days among members age 16 and older with a diagnosis of OUD. Report two age stratifications and total rate. Ages: 16 years and older Performed: July 1 of the year prior to the measurement year and ends on June 30 of the measurement year.	Methadone is not included on the medication lists for this measure. Methadone for OUD administered or dispensed by federally certified opioid treatment programs (OTP) is billed on a medical claim. A pharmacy claim for methadone would be indicative of treatment for pain rather than OUD.	HCPCS: J0570-J0575, J2315, Q9
Diabetes Screening for People with Schizophrenia or Bipolar Disorder Using Antipsychotic Medications (SSD) Members with schizophrenia, schizoaffective disorder or bipolar disorder who received an antipsychotic medication and had a diabetes screening test. Ages: 18-64 years Performed: Jan. 1–Dec. 31 of measurement year*	 Encourage members with schizophrenia, schizoaffective disorder or bipolar disorder who are also on antipsychotic medication to contact their PCP to schedule a HbA1c test (or glucose test) annually. To increase compliance, consider using standing orders to get these labs done. For a complete list of medications and NDC codes, visit www.ncqa.org (posted by Nov. 1, 2017). For Medicaid, please refer to the Preferred Drug List (PDL) on the state-specific WellCare website. 	Glucose Tests: CPT: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951 HbAlc Tests: CPT: 83036,83037 CPT II: 3044F, 3045F, 3046F
Diabetes Monitoring for People with Diabetes and Schizophrenia (SMD) Members with schizophrenia or schizoaffective disorder and diabetes who had both an LDL-C and an HbAlc test during the measurement year. Ages: 18-64 years Performed: Jan. 1–Dec. 31 of measurement year*	 Encourage members with schizophrenia or schizoaffective disorder and diabetes to contact their PCP to schedule a HbA1c and LDL-C test. To increase compliance, consider using standing orders to get labs done. 	HbA1c Tests: CPT: 83036, 83037 CPT II: 3044F, 3045F, 3046F LDL-C Tests: CPT: 80061, 83700, 83701, 83704, 83721 CPT II: 3048F, 3049F, 3050F

HEDIS Measure	HEDIS Tips	Sample Codes Used
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia (SMC) Members with schizophrenia or schizoaffective disorder and cardiovascular disease who had an LDL-C test during the measurement year. Ages: 18-64 years Performed: Jan. 1—Dec. 31 of measurement year*	 Encourage members with schizophrenia or schizoaffective disorder and cardiovascular disease to contact their PCP to schedule a LDL-C test. To increase compliance, consider using standing orders to get labs done. 	LDL-C Tests: CPT Codes: 80061, 83700, 83701, 83704, 83721 CPT II Codes: 3048F, 3049F, 3050F
Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA) Members with schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period. Ages: 18 years of age and older Performed: Jan. 1–Dec. 31 of measurement year*	 Consider the use of long-acting injectable antipsychotic medications to increase adherence. Educate your patients on how to take their medications. Include the importance of continuing to take the medication even if they begin feeling better and to not stop taking the medication without consulting you first. For a complete list of medications and NDC codes, please visit www.ncqa.org. For Medicaid, please refer to the Preferred Drug List (PDL) on the state-specific WellCare website. 	Long-Acting Injections HCPCS: 14-day supply: J2794 28-day supply: J0401, J1631, J2358, J2426, J2680

