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<th>PROVIDER SERVICES INQUIRIES</th>
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<td>CommunityHealthChoice.org</td>
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<td>713.295.2295</td>
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**HEDIS/P4Q MEASURE** | **MEASURE DESCRIPTION** | **BILLING TIPS**
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**Prenatal Care (PPC)** | A visit that occurs in the first trimester of the pregnancy, on or before the enrollment start date or within 42 days of enrollment in the health plan.
1. Documentation of LMP or EDD in conjunction with either of the following:
   a. Prenatal risk assessment and counseling/education; or
   b. Complete obstetrical history
2. Evidence of prenatal care procedures such as: 
   a. Obstetric panel or 
   b. TORCH antibody panel or 
   c. Rubella antibody test/titer with Rh-incompatibility (ABO/Rh) blood typing or 
   d. Ultrasound of a pregnant uterus
**Documentation must include one of the following:**
1. OB exam with fetal heart tones or pelvic exam with obstetric observations or fundus height.
| CPT: 99201-99205, 99211-99215, 99241-99245, 99483, 99500 |
| HCPCS: G0463, T1015, H1000-H1005 |
| ICD-10: O09.00-O9A.519, Z03.71-Z03.79, Z34.00-Z34.03, Z34.80-Z34.83, Z34.90-Z34.93, Z36-Z36.5, Z36.81-Z36.9 |

**Postpartum Care (PPC)** | A visit that occurs on or between 7 to 84 days after delivery
Components of a postpartum visit include:
1. Pelvic exam or 
2. Documentation of weight, blood pressure, breast and abdominal evaluation, and breast feeding status or 
3. Notation of postpartum check, postpartum care or six-week check or 
4. Screening for depression, anxiety, tobacco use disorder or preexisting mental health disorders or 
5. Glucose screening for women with gestational diabetes or 
7. Documentation of infant care/breastfeeding, sleep/fatigue, birth spacing, family planning, resumption of intercourse or resumption of physical activity and attainment of healthy weight.
| CPT: 57170, 58300, 59430, 88141-88154, 88164-88167, 88174-88175, 99501 |
| HCPCS: Q0091, G0101 |
| ICD-10: Z01.411, Z01.419, Z01.42, Z30.430, Z39.1, Z39.2 |

**Hemoglobin A1c (HbA1c) Testing (CDC Sub-measure)** | The percentage of Members 18-75 years of age with diabetes (type 1 and type 2) who had hemoglobin A1c (HbA1c) testing during the measurement year. 
Documentation in the medical record must include a note indicating the date when the HbA1c test was performed and the result/finding. 
A lower rate indicates better performance for this indicator. 
Count notation of the following:
1. A1c or 
2. HbA1c or 
3. HgbA1c or |
| CPT: 83036, 83037 |

**Controlling High Blood Pressure (CBP)** | The percentage of Members 18-85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (<140/90 mm Hg) during the measurement year. 
Members must have at least two visits on different dates of service with a diagnosis of hypertension during the measurement year or the year prior to the measurement year. Services that occur over both years count. 
The most recent BP reading during the measurement year on or after the second diagnosis of hypertension must be less than 140/90 to be compliant for this measure. 
| ICD-10: 110 |
| CPT-CAT-II: 3074F, 3075F, 3078F, 3079F |

**This is to be used as a HEDIS quick reference guide and is not an all-inclusive list of ICD-10 codes. Please refer to your ICD-10 codebook for the complete list.**
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| **Adolescent Well-Care Visits (AWC)** | The percentage of Members 12-21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year. Documentation in the medical record must include a note indicating a visit with a PCP practitioner, the date when the well-child visit occurred, and evidence of all the following: 1. Health history 2. Physical developmental history 3. Mental developmental history | CPT: 99384, 99385, 99394, 99395  
HCPCS: G0438, G0439  
ICD-10: Z00.00, Z00.01, Z00.121, Z00.129, Z00.8, Z02.0-Z02.6, Z02.82, Z76.2 |
| **Appropriate Treatment for Upper Respiratory Infection (URI)** | The percentage of episodes for Members 3 months of age and older who were given a diagnosis of upper respiratory infection that did not result in an antibiotic dispensing episode. | ICD-10: J00 Acute nasopharyngitis, J06.0 Acute laryngopharyngitis, J06.9 Acute upper respiratory infection, unspecified |
| **Well-Child Visits in the First 15 Months of Life (W15)** | The percentage of Members who turned 15 months old during the measurement year and who had 6 or more well-child visits with a PCP during their first 15 months of life. Documentation in the medical record must include a note indicating a visit with a PCP practitioner, the date when the well-child visit occurred, and evidence of all the following: 1. Health history 2. Physical developmental history 3. Mental developmental history | CPT: 99381, 99382, 99391, 99392  
HCPCS: G0438, G0439  
ICD-10: Z00.110, Z00.111, Z00.121, Z00.129, Z00.8, Z02.0, Z02.82, Z76.1, Z76.2 |
| **Counseling for Nutrition for Children/Adolescents (WCC Sub-measure)** | The percentage of Members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of counseling for nutrition during the measurement year. Documentation in the medical record must include a note indicating the date and at least one of the following: a. Discussion of current nutrition behaviors (e.g. eating habits, dietary behaviors) or b. Checklist indicating nutrition was addressed or c. Counseling or referral for nutrition education or d. Member received educational material on nutrition during face-to-face visit or e. Anticipatory guidance for nutrition or f. Weight or obesity counseling or g. Referral to WIC nutrition program | CPT: 97802-97804  
HCPCS: G0270, G0271, G0447, S9449, S9452, S9470  
ICD-10: Z71.3 |
| **Immunizations for Adolescents (IMA)** | The percentage of adolescents 13 years of age who had one-dose meningococcal vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and have completed the human papillomavirus (HPV) vaccine series by their 13th birthday. The measure calculates a rate for each vaccine and two combination rates. 1. Meningococcal Immunization: At least one with date of service on/between 11th and 13th birthday 2. Tdap Immunization: At least one with date of service on/between 10th and 13th birthday 3. HPV Immunization: a. At least two with dates of service 146 days apart on/between 9th and 13th birthday, or b. At least three with different dates of service on/between 9th and 13th birthday 4. Combination 1: Compliance for both the meningococcal and Tdap indicators 5. Combination 2: Compliance for all three indicators (meningococcal, Tdap, and HPV) | Meningococcal Immunization  
CPT: 90734  
CVX: 108, 114, 136, 147, 167  
Tdap Immunization  
CPT: 90715  
CVX: 115  
HPV Immunization  
CPT: 90649-90651  
CVX: 62, 118, 137, 165 |