

2017 HEDIS® AT-A-GLANCE KEY BEHAVIORAL HEALTH MEASURES (18 YEARS AND OLDER)

HEDIS MEASURE	DOCUMENTATION TIPS	SAMPLE CODES USED*
<p>Antidepressant Medication Management Those members with a diagnosis of major depression and were treated with antidepressant medication, and who remained on an antidepressant medication treatment.</p> <p>Two rates are reported:</p> <ul style="list-style-type: none"> • 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). <p>Ages: 18 years and older Performed: May 1, 2015–April 30, 2016</p>	<p>Educate your patients on how to take their antidepressant medications. Important messages include:</p> <ul style="list-style-type: none"> • How antidepressants work, their benefits and how long they should be used • Length of time patient should expect to be on the antidepressant before they start to feel better • Importance of continuing to take the medication even if they begin feeling better • Common side effects, how long the side effects may last and how to manage them • What to do if they have questions or concerns <p>For a complete list of medications and NDC codes, visit www.ncqa.org (to be posted by Nov. 1, 2016). For Medicaid, please refer to the Preferred Drug List (PDL) on the State-Specific WellCare web site. For Medicare, please refer to the WellCare Formulary.</p>	<p>ICD-10-Dx: F32.0-F32.4, F32.9, F33.0-F33.3, F33.41, F33.9</p> <p>AMM STAND-ALONE VISITS CPT Codes: 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347, 99350, 99384-99387, 99394-99397, 99401-99404, 99411-99412, 99510</p> <p>ED VISITS CPT Codes: 99281-99285</p> <p>AMM VISITS WITH POS CPT Codes: 90791, 90792, 90832, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90867-90870, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255</p> <p>POS: 03, 05, 07, 09, 11-20, 22, 24, 33, 49, 50, 52, 53, 71, 72</p>
<p>Diabetes Screening for People with Schizophrenia or Bipolar Disorder Using Antipsychotic Medications Those members with Schizophrenia or Bipolar Disorder who received an antipsychotic medication and had a diabetes screening test.</p> <p>Ages: 18-64 years Performed: Jan. 1–Dec. 31, 2016</p>	<ul style="list-style-type: none"> • Encourage members with schizophrenia or bipolar disorder who are also on antipsychotic medication to get a diabetic screening. <p>For a complete list of medications and NDC codes, visit www.ncqa.org (to be posted by Nov. 1, 2016). For Medicaid, please refer to the Preferred Drug List (PDL) on the State-Specific WellCare website.</p>	<p>ICD-10-Dx:</p> <p>Schizophrenia: F20.0-F20.3, F20.5, F20.81, F20.89, F20.9, F25.0, F25.1, F25.8, F25.9</p> <p>Bipolar Disorder: F30.10-F30.13, F30.2-F30.4, F30.8, F30.9, F31.0, F31.10-F31.13, F31.2, F31.30-F31.32, F31.4, F31.5, F31.60-F31.64, F31.70-F31.78</p> <p>Other Bipolar Disorders: F31.81, F31.89, F31.9</p> <p>CPT Codes: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951, 83036, 83037</p> <p>CPT II Codes: 3044F, 3045F, 3046F</p>

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<p>Diabetes Monitoring for People with Diabetes and Schizophrenia</p> <p>Those members with schizophrenia and diabetes who had both an LDL-C and an HbA1C test during the measurement year.</p> <p>Ages: 18-64 years</p> <p><i>Performed: Jan. 1–Dec. 31, 2016</i></p>	<ul style="list-style-type: none"> Schedule an HbA1c test <i>and</i> an LDL-C test for members with schizophrenia and diabetes. To increase compliance, consider using standing orders to get labs done. 	<p>ICD-10-Dx:</p> <p>Schizophrenia: F20.0-F20.3, F20.5, F20.81, F20.89, F20.9, F25.0, F25.1, F25.8, F25.9</p> <p>Diabetes: Use the appropriate code family: E or O (pre-existing DM in pregnancy)</p> <p>CPT Codes:</p> <p>HbA1C tests: 83036, 83037</p> <p>LDL-C tests: 80061, 83700, 83701, 83704, 83721</p> <p>CPT II Codes: 3044F, 3045F, 3046F, 3048F, 3049F, 3050F</p>
<p>Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia</p> <p>Those members with schizophrenia and cardiovascular disease, who had an LDL-C test during the measurement year.</p> <p>Ages: 18-64 years</p> <p><i>Performed: Jan. 1–Dec. 31, 2016</i></p>	<ul style="list-style-type: none"> Encourage members with schizophrenia and cardiovascular disease to contact their PCP to schedule a LDL-C test. To increase compliance, consider using standing orders to get labs done. 	<p>ICD-10-Dx:</p> <p>Schizophrenia: F20.0-F20.3, F20.5, F20.81, F20.89, F20.9, F25.0, F25.1, F25.8, F25.9</p> <p>Ischemic Vascular Disease (IVD): Use the appropriate code family: I</p> <p>CPT Codes:</p> <p>LDL-C Test: 80061, 83700, 83701, 83704, 83721</p> <p>CPT II Codes: 3048F, 3049F, 3050F</p>
<p>Antipsychotic Medications Adherence for Individuals with Schizophrenia</p> <p>Members with schizophrenia who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period.</p> <p>Ages: 19-64 years</p> <p><i>Performed: Jan. 1–Dec. 31, 2016</i></p>	<p>Exclusions:</p> <ul style="list-style-type: none"> Dementia diagnosis Did not receive at least 2 antipsychotic medications dispensing events. <p>Encourage schizophrenic patients to discuss any side effects, take their medication as prescribed, and refill their medication on time.</p> <p>For a complete list of medications and NDC codes, please visit www.ncqa.org (to be posted by Nov. 1, 2016). For Medicaid, please refer to the Preferred Drug List (PDL) on the state-specific WellCare website.</p>	<p>ICD-10-Dx: F20.0, F20.1, F20.2, F20.3, F20.5, F20.81, F20.89, F20.9, F25.0, F25.1, F25.8, F25.9</p> <p>HCPCS:</p> <p>14-day supply: J2794</p> <p>28-day supply: J0401, J1631, J2358, J2426, J2680</p>
<p>Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults</p> <p>Those with a diagnosis of major depression or dysthymia, who have a PHQ-9 tool administered at least once during a four-month period.</p> <p>Ages: 12 and older</p> <p><i>Performed: Jan. 1–Dec. 31, 2016</i></p>	<p>Two rates are reported:</p> <ul style="list-style-type: none"> Inclusion in ECDS Coverage. Members 12 and older with a diagnosis of major depression or dysthymia, who are included in an electronic clinical data system (ECDS). The percentage of PHQ-9 utilization. Members with a diagnosis of major depression or dysthymia whose measure data are reportable using ECDS and, had an outpatient encounter with a PHQ-9 score present in their record in the same assessment period as the encounter. 	<p>Major Depression and Dysthymia</p> <p>ICD-10-Dx: Use the appropriate code family: F</p> <p>Depression Encounter</p> <p>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</p> <p>PHQ Administered</p> <p>LOINC: 44249-1, 44257 4, 44261-6, 54635-8</p>

HEDIS MEASURE	DOCUMENTATION TIPS	SAMPLE CODES USED*
<p>Follow-Up After Hospitalization For Mental Illness</p> <p>Members who were discharged after hospitalized treatment of selected mental illness diagnoses and who had a follow-up visit with a mental health practitioner.</p> <p>Ages: 6 years and older</p> <p>Performed: Jan. 1–Dec. 1, 2016</p>	<ul style="list-style-type: none"> Schedule the 7 Day Follow-Up visit within 5 days of discharge to allow flexibility in rescheduling. If the appointment doesn't occur within the first 7 days post-discharge, please schedule within 30 days. Involve the patient's caregiver regarding the follow-up plan after IP discharge. Definitions of mental health practitioners are available in the WellCare HEDIS® Behavioral Health Resource Guide under this measure. <p>Two rates are reported:</p> <ul style="list-style-type: none"> The percentage 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. 	<p>ICD-10-Dx: Use the appropriate code family: F</p> <p>Stand-Alone Visits (7 and 30 days post discharge)</p> <p>CPT Codes: 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347, 99350, 99383-99387, 99393-99397, 99401-99404, 99411, 99412, 99510</p> <p>Transitional Care</p> <p>CPT Codes: 99495 (14 Days, used for 30-Day Follow-up indicator) and 99496 (7 Days)</p> <p>Follow-up visits (Group 1) with POS</p> <p>CPT Codes: 90791, 90792, 90832, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90867-90870, 90875, 90876</p> <p>WITH POS: 03, 05, 07, 09, 11-20, 22, 24, 33, 49, 50, 52, 53, 71, 72</p> <p>Follow-up visits (Group 2) with POS</p> <p>CPT Codes: 99221-99223, 99231-99233, 99238, 99239, 99251-99255</p> <p>WITH POS: 52, 53</p>
<p>Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)</p> <p>Those adolescent and adult members with a new episode of alcohol or other drug (AOD) dependence who received the following:</p> <ul style="list-style-type: none"> Initiation of AOD Treatment – Members who initiated treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis. Engagement of AOD Treatment – Members who initiated treatment and who had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit. <p>Ages: 13 years and older</p> <p>Performed: (For AOD newly diagnosed) Jan. 1–Nov. 15, 2016:</p> <ul style="list-style-type: none"> Initiation visit must occur within 14 days of new AOD diagnosis, and; Engagement visits within 30 days of Initiation visit. 	<ul style="list-style-type: none"> Schedule the initial 14 Day Follow Up visit within 10 days of new AOD diagnosis to allow flexibility in rescheduling. Involve the patient's caregiver regarding the follow-up plan, if possible. At the end of the initial follow-up appointment, schedule two more follow-up appointments to occur within 30 days of the initial follow-up appointment. When treating a patient for issues related to an alcohol or other drug dependence diagnosis, code for that diagnosis on every claim. 	<p>ICD-10-Dx: Use the appropriate code family: F</p> <p>Stand-Alone Visits</p> <p>CPT Codes: 98960-98962, 99078, 99201-99205, 99211-99215, 99217, 99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99408, 99409, 99411, 99412, 99510</p> <p>IET Visits (Group 1) with POS</p> <p>CPT Codes: 90791, 90792, 90832, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876</p> <p>WITH POS: 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 52, 53, 57, 71, 72</p> <p>IET Visits (Group 2) with POS</p> <p>CPT Codes: 99221-99223, 99231-99233, 99238, 99239, 99251-99255</p> <p>WITH POS: 52, 53</p>

HEDIS MEASURE	DOCUMENTATION TIPS	SAMPLE CODES USED*
<p>NEW MEASURE Follow-Up After Emergency Department (ED) Visit for Mental Illness</p> <p>Members who had an ED visit with a principal diagnosis of mental illness and who had outpatient visit, an intensive outpatient encounter or partial hospitalization with any practitioner within 30 days and 7 days after the ED visit.</p> <p>Ages: 6 years and older <i>Performed: Jan. 1, 2016-Dec. 31, 2016</i></p>	<p>Schedule the 7 Day Follow-Up visit within 5 days of ED visit to allow flexibility in rescheduling. If appointment doesn't occur within first 7 days, schedule within 30 days of post-ED visit. Involve the patient's caregiver regarding the follow-up plan after ED visit, if possible.</p> <p>Two rates are reported:</p> <ul style="list-style-type: none"> • The percentage of ED visits for which the member received follow-up within 30 days of the ED visit. • The percentage of ED visits for which the member received follow-up within 7 days of the ED visit 	<p>ICD-10-Dx: Use the appropriate code family: F</p> <p>STAND-ALONE VISITS</p> <p>CPT Codes: 98960-98962, 99078, 99201-99205, 99211-99215, 99217, 99220, 99241-99245, 99341-99345, 99347-99350, 99383-99387, 99393-99397, 99401-99404, 99411, 99412, 99495, 99496, 99510</p> <p>Telehealth: 98966-98969, 99441-99444</p> <p>FOLLOW-UP GROUP 1 WITH POS</p> <p>CPT Codes: 90791, 90792, 90832, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90867-90870, 90875, 90876</p> <p>POS: 03, 05, 07, 09, 11-20, 22, 24, 33, 49, 50, 52, 53, 71, 72</p> <p>FOLLOW-UP GROUP 2 WITH POS</p> <p>CPT Codes: 99221-99223, 99231-99233, 99238, 99239, 99251-99255</p> <p>POS: 52, 53</p>
<p>NEW MEASURE Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence</p> <p>Members who had an ED visit with a principal diagnosis of alcohol or other drug (AOD) dependence and who had outpatient visit, an intensive outpatient encounter or partial hospitalization with any practitioner within 30 days and 7 days after the ED visit.</p> <p>Ages: 13 years and older <i>Performed: Jan 1, 2016-Dec 31, 2016</i></p>	<p>Schedule the 7 Day Follow-Up visit within 5 days of ED visit to allow flexibility in rescheduling. If appointment doesn't occur within first 7 days, schedule within 30 days of post-ED visit. Involve the patient's caregiver regarding the follow-up plan after ED visit, if possible.</p> <p>Two rates are reported:</p> <ul style="list-style-type: none"> • The percentage of ED visits for which the member received follow-up within 30 days of the ED visit. • The percentage of ED visits for which the member received follow-up within 7 days of the ED visit. 	<p>ICD-10-Dx: Use the appropriate code family: F</p> <p>STAND-ALONE VISITS</p> <p>CPT Codes: 98960-98962, 99078, 99201-99205, 99211-99215, 99217, 99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99408, 99409, 99411, 99412, 99510</p> <p>Telehealth: 98966-98969, 99441-99444</p> <p>FOLLOW-UP GROUP 1 WITH POS</p> <p>CPT Codes: 90791, 90792, 90832, 90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876</p> <p>POS: 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 52, 53, 71, 72</p> <p>FOLLOW-UP GROUP 2 WITH POS</p> <p>CPT Codes: 99221-99223, 99231-99233, 99238, 99239, 99251-99255</p> <p>POS: 52, 53</p>