At WellCare, we value everything you do to deliver quality care for our members – your patients – to make sure they have a positive health care 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, which 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!

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<tr>
<td><strong>Antidepressant Medication Management (AMM)</strong></td>
<td>Educate your patients on how to take their antidepressant medications. Important messages include:</td>
<td><strong>ICD-10-Dx:</strong> F32.0-F32.4, F32.9, F33.0-F33.3, F33.41, F33.9</td>
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<td>Those 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:</td>
<td>• How antidepressants work, their benefits and how long they should be used</td>
<td><strong>AMM Stand-Alone Visits</strong></td>
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<td>• Effective Acute Phase Treatment – Members who remained on an antidepressant medication for at least 84 days (12 weeks).</td>
<td>• Length of time patient should expect to be on the antidepressant before they start to feel better</td>
<td><strong>CPT Codes:</strong> 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411, 99412, 99510</td>
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<td>• Effective Continuation Phase Treatment – Members who remained on an antidepressant medication for at least 180 days (6 months).</td>
<td>• Importance of continuing to take the medication even if they begin feeling better</td>
<td><strong>Telephone Visits:</strong> 98966-98968, 99441-99443</td>
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<td><strong>Ages:</strong> 18 years and older</td>
<td>• Common side effects, how long the side effects may last and how to manage them</td>
<td><strong>CPT Telehealth Modifiers:</strong> 95, GT</td>
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<td><strong>Performed:</strong> Jan. 1–Dec. 31 of measurement year and prior year</td>
<td>• What to do if they have questions or concerns</td>
<td><strong>HCPCS:</strong> G0155, G0176,G0177, G0409-G0411, G0463, H0002, H0004, H0031, H0034-H0037, H0039, H0040, H2000, H2001, H2010-H2020, M0064, S0201, S9480, S9484, S9485, T1015</td>
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For a complete list of medications and NDC codes, visit [www.ncqa.org](http://www.ncqa.org) (posted by Nov. 1, 2017). 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.

* Please refer to the Behavioral Health Resource Guide for additional information. Reimbursement for these services is in accordance with the terms and conditions of your provider agreement. Coding is in accordance with HEDIS® 2018 Guidelines & Specifications; please use most recent CPT, HCPCS or ICD-10 codes. HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).
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| **Diabetes Screening for People with Schizophrenia or Bipolar Disorder Using Antipsychotic Medications (SSD)** | - Encourage members with schizophrenia or bipolar disorder who are also on antipsychotic medication to get a diabetic screening. For a complete list of medications and NDC codes, visit [www.ncqa.org](http://www.ncqa.org) (posted by Nov. 1, 2017). For Medicaid, please refer to the Preferred Drug List (PDL) on the State-Specific WellCare website. | ICD-10-Dx:  
Other Bipolar Disorders: F31.81, F31.89, F31.9  
CPT Codes: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951, 83036, 83037  
CPT II Codes: 3044F, 3045F, 3046F |
| **Diabetes Monitoring for People with Diabetes and Schizophrenia (SMD)**     | - Schedule an HbA1c test and an LDL-C test for members with schizophrenia and diabetes. To increase compliance, consider using standing orders to get labs done.                                                             | ICD-10-Dx:  
Diabetes: Use the appropriate code family: E or O (pre-existing DM in pregnancy)  
CPT Codes: HbA1C tests: 83036, 83037  
LDL-C tests: 80061, 83700, 83701, 83704, 83721  
CPT II Codes: 3044F, 3045F, 3046F, 3048F, 3049F, 3050F |
| **Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia (SMC)** | - 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.                                      | ICD-10-Dx:  
Ischemic Vascular Disease (IVD): Use the appropriate code family: I  
LDL-C Test:  
CPT Codes: 80061, 83700, 83701, 83704, 83721  
CPT II Codes: 3048F, 3049F, 3050F |
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<td><strong>Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA)</strong>&lt;br&gt;Members with schizophrenia who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period.&lt;br&gt;Ages: 19-64 years&lt;br&gt;Performed: Jan. 1–Dec. 31 of measurement year</td>
<td>Exclusions:&lt;li&gt;Dementia diagnosis&lt;/li&gt;&lt;li&gt;Did not receive at least 2 antipsychotic medications dispensing events.&lt;/li&gt;Encourage schizophrenic patients to discuss any side effects, take their medication as prescribed, and refill their medication on time.&lt;br&gt;For a complete list of medications and NDC codes, please visit <a href="http://www.ncqa.org">www.ncqa.org</a> (posted by Nov. 1, 2017). For Medicaid, please refer to the Preferred Drug List (PDL) on the state-specific WellCare website.</td>
<td>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&lt;br&gt;HCPCS:&lt;br&gt;14-day supply: J2794&lt;br&gt;28-day supply: J0401, J1631, J2358, J2426, J2680</td>
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<td><strong>Follow-Up After Hospitalization For Mental Illness (FUH)</strong>&lt;br&gt;Members who were discharged after hospitalized treatment of selected mental illness diagnoses and who had a follow-up visit with a mental health practitioner.&lt;br&gt;Ages: 6 years and older&lt;br&gt;Performed: Jan. 1–Dec. 31 of measurement year</td>
<td>• 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.&lt;br&gt;• Definitions of mental health practitioners are available in the WellCare HEDIS® Behavioral Health Resource Guide under this measure.&lt;br&gt;Two rates are reported:&lt;br&gt;• The percentage of discharges for which the member received follow-up within 7 days of discharge.&lt;br&gt;• The percentage of discharges for which the member received follow-up within 30 days of discharge.</td>
<td>ICD-10-Dx: Use the appropriate code family: F&lt;br&gt;Stand-Alone Visits (7 and 30 days post discharge)&lt;br&gt;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&lt;br&gt;CPT Telehealth Modifiers: 95, GT&lt;br&gt;HCPCS:&lt;br&gt;G0155, G0176, G0177, G0409-G0411, G0463, H0002, H0004, H0031, H0034-H0037, H0039, H0040, H2000, H2001, H2010-H2020, M0064, S0201, S9480, S9484, S9485, S9487, T1015&lt;br&gt;Transitional Care&lt;br&gt;CPT Codes: 99495 (14 Days, used for 30-Day Follow-up indicator) and 99496 (7 Days)&lt;br&gt;Follow-up visits (Group 1) with POS&lt;br&gt;CPT Codes: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90867-90870, 90875, 90876&lt;br&gt;WITH POS: 03, 05, 07, 09, 11-20, 22, 24, 33, 49, 50, 52, 53, 57, 72&lt;br&gt;Follow-up visits (Group 2) with POS&lt;br&gt;CPT Codes: 99221-99223, 99231-99233, 99238, 99239, 99251-99255&lt;br&gt;WITH POS: 52, 53</td>
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### HEDIS Measure

**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) abuse, or dependence, who received the following:

- **Initiation of AOD Treatment** – Members who initiated treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication assisted treatment (MAT), 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 services, or MAT, within 34 days of the initiation visit.

**Ages:** 13 years and older

**Performed:** (For AOD newly diagnosed)

Jan. 1–Dec. 31 of measurement year

- **Initiation visit must occur within 14 days of new AOD diagnosis, and:**
- **Engagement visits within 30 days of Initiation visit.**

### Documentation Tips

- 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.

### Sample Codes Used*

**ICD-10-Dx:** Use the appropriate code family: F

**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, 99408, 99409, 99411, 99412, 99510
- **Telephone Visits:** 98966-98968, 99441-99443
- **Telehealth Modifiers:** 95, GT
- **Online Assessment:** 98969, 99444

- **CPT Telehealth Modifiers:** 95, GT


**IET Visits (Group 1) with POS**

- **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

**IET Visits (Group 2) with POS**

- **CPT Codes:** 99221-99223, 99231-99233, 99238, 99239, 99251-99255
  - **WITH POS:** 52, 53

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*Sample Codes Used*
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| **Follow-Up After Emergency Department (ED) Visit for Mental Illness (FUM)** | Members who had an ED visit with a principal diagnosis of mental illness and who had an outpatient visit, an intensive outpatient encounter or partial hospitalization with any practitioner within 30 days and 7 days after the ED visit. Age: 6 years and older **Performed: Jan. 1–Dec. 31 of measurement year** | ICD-10-Dx: Use the appropriate code family: F  
**STAND-ALONE VISITS**  
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  
CPT Telehealth Modifiers: 95, GT  
**FOLLOW-UP GROUP 1 WITH POS**  
CPT Codes: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90867-90870, 90875, 90876  
POS: 03, 05, 07, 09, 11-20, 22, 24, 33, 49, 50, 52, 53, 71, 72  
**FOLLOW-UP GROUP 2 WITH POS**  
CPT Codes: 99221-99223, 99231-99233, 99238, 99239, 99251-99255  
POS: 52, 53 |  

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| **Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)** | 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. Two rates are reported: • 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. | **ICD-10-Dx:** Use the appropriate code family: F  
**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, 99408, 99409, 99411, 99412, 99510  
**Online Assessment:** 98969, 99444  
**Telephone Visits:** 98966-98968, 99441-99443  
**CPT Telehealth Modifiers:** 95, GT  
**POS:** 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 52, 53, 57, 71, 72  
**FOLLOW-UP GROUP 2 WITH POS**  
**CPT Codes:** 99221-99223, 99231-99233, 99238, 99239, 99251-99255  
**POS:** 52, 53 |
| **Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS)** | Two rates are reported: • **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. | **Major Depression and Dysthymia**  
**ICD-10-Dx:** F32.0-F32.5, 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  
**PHQ Administered**  
**LOINC:** 44249-1, 44257-4, 44261-6, 54635-8 |