


2024 Federal Employee Program

HEDIS® Quick Tips

Preventative Screenings



	Codes	Definition
 Preventative Screenings	BCS-E Breast Cancer Screening	Women 50–74 years of age who had a mammogram to screen for breast cancer every two years. CPT 77061, 77062, 77063, 77065, 77066, 77067 CPT-II code 3014F Screening mammography results documented and reviewed EXCLUSION: Z90.13 History of bilateral mastectomy
	COL-E Colorectal Cancer Screening	Individuals 50–75 years of age screened for colorectal cancer. Frequency: Varies based on screening type: <ul style="list-style-type: none"> FOBT/FIT Kit: Every year Sigmoidoscopy: Every 5 years Colonoscopy: Every 10 years FIT DNA/Cologuard®: Every 3 years CT Colonography: Every 5 years CPT-II code to help in collecting data from prior year screening results when applicable: 3017F Colorectal cancer screening results documented and reviewed <i>COL transitions to Electronic Clinical Data Systems (ECDS) reporting for COL-E. For more information on ECDS reporting, visit the NCQA's webpage: NCQA.ORG</i>
	CCS Cervical Cancer Screening	The percentage of women 21–64 years of age who were screened for cervical cancer in the previous 3–5 years. Document date of latest pap smear and/or HPV and result (member reported is acceptable). Qualifying CPT if performed in-office: Q0091 CPT-II code 3015F Cervical cancer screening results and reviewed EXCLUSION: Z90.710 Acquired absence of both cervix and uterus

This quick reference is intended to be a tool to aid in improving your 2024 HEDIS® measures for the Blue Cross® Blue Shield® Federal Employee (FEP®) Line of Business. Many gaps can be closed through telehealth visits if properly documented and coded.

**For detailed
information
about this
measure**

[Click
here](#)


For more information and full HEDIS® specs please visit the National Committee for Quality Assurance at [ncqa.org/wp-content/uploads/HEDIS-MY-2024-Measure-Description.pdf](https://www.ncqa.org/wp-content/uploads/HEDIS-MY-2024-Measure-Description.pdf)

2024 Federal Employee Program

HEDIS® Quick Tips

Family Planning



	Codes	Definition
 Family Planning	PPC Prenatal and Postpartum Care	<p>Timeliness of Prenatal Care: The percentage of deliveries that received a prenatal care visit in the first trimester. First trimester: First 12 weeks of pregnancy.</p> <p>Measurement year: Live births on or between October 8 of the year prior to the measurement year and October 7 of the current measurement year.</p> <p>Compliant visits include a prenatal care visit to an OB/GYN or other prenatal care practitioner, or PCP.</p> <p>For visits to a PCP, a diagnosis of pregnancy must be present for compliance.</p>
	W30 Well-Child Visits	<p>W-30A Well-Child Visits in the First 15 Months. Children who turned 15 months old during the measurement year: Six or more well-child visits BEFORE the 15-month birthday.</p> <p>W-30B Well-Child Visits for Age 15 Months–30 Months. Children who turned 30 months old during the measurement year: Two or more well-child visits BEFORE the 30-month birthday.</p> <p>Qualifying CPT Codes:</p> <p>New patient well visit: 99381-99385</p> <p>Established patient well visit: 99391-99395</p>
	CIS Childhood Immunizations Combo 10	<p>The percentage of children 2 years of age who had all combo 10 vaccines by their second birthday, including 2 does of flu vaccine.</p> <p>All immunizations must be logged in ASIIS.</p> <p>If multiple immunizations are administered on the same visit, ensure that all immunizations are included on the claim.</p> <p>For the latest immunization recommendations please refer to: cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html</p>


This quick reference is intended to be a tool to aid in improving your 2024 HEDIS® measures for the Blue Cross® Blue Shield® Federal Employee (FEP®) Line of Business. Many gaps can be closed through telehealth visits if properly documented and coded.

**For detailed
information
about this
measure**

[Click
here](#)

2024 Federal Employee Program HEDIS® Quick Tips Appropriate Service Utilization



	Codes	Definition
 Appropriate Service Utilization	AAB Avoidance of Antibiotic Treatment for Acute Bronchitis	<p>The percentage of episodes for members ages 18–64 with a diagnosis of acute bronchitis/ bronchiolitis that did not result in an antibiotic dispensing event on or 3 days after the episode date.</p> <p>Measurement Year: A 12-month window that begins on July 1 of the year prior to the measurement year and ends on June 30 of the current measurement year.</p> <p>EXAMPLE: If patient is seen on Monday and diagnosed with bronchitis and is not prescribed or does not fill an antibiotic prescription until or after Friday of that same week = compliant</p>
	LBP Use of Imaging Studies for Low Back Pain	<p>The percentage of members 18–75 years of age with a principal diagnosis of low back pain who did NOT have an imaging study (plain X-ray, MRI, CT scan) within 28 days of the diagnosis.</p> <p>Example: If patient is seen May 1 and diagnosed with lower back pain, an imaging study can be rendered May 29</p> <p>Common Exclusions:</p> <ul style="list-style-type: none"> Recent Trauma: Trauma any time during the 3 months (90 days) prior to the IESD through 28 days after the IESD. G89.11, ICD-10 S codes for trauma/fractures Cancer: Cancer any time during the member's history through 28 days after the IESD. ICD-10 C and D Codes (active) / Z Codes (history of)
	UOP Use of Opioids from Multiple Providers	<p>The percentage of members 18 years and older, receiving prescription opioids for ≥15 days during the measurement year, who received opioids from multiple providers (4 or more different prescribers).</p> <p>Suggested workflow for Pain Clinics: Assign no more than 2 prescribers for opioid prescriptions per member per year.</p> <p>Exclusions: The following opioid medications are excluded from this measure:</p> <ul style="list-style-type: none"> Injectables Opioid cough and cold products Single-agent and combination buprenorphine products used as part of medication assisted treatment lonsys® (fentanyl transdermal patch) Methadone for the treatment of opioid use disorder

This quick reference is intended to be a tool to aid in improving your 2024 HEDIS® measures for the Blue Cross® Blue Shield® Federal Employee (FEP®) Line of Business. Many gaps can be closed through telehealth visits if properly documented and coded.

For detailed information about this measure

Click here


For more information and full HEDIS® specs please visit the National Committee for Quality Assurance at ncqa.org/wp-content/uploads/HEDIS-MY-2024-Measure-Description.pdf

2024 Federal Employee Program

HEDIS® Quick Tips

Medication Management



	Codes	Definition
 Medication Management	AMM Antidepressant Medication Management	<p>The percentage of members 18 years of age and older who were treated with antidepressant medication, had a diagnosis of major depression, and who remained on an antidepressant medication treatment for at least 180 days.</p> <p>Measurement Year: A 12-month window starting on May 1 of the year prior to the measurement year and ending on April 30 of the measurement year.</p> <p>Suggested Workflow: Providers should prescribe and fill 90-day prescriptions to reduce gaps in treatment.</p>
	SPC Statin Therapy for Patients w/ Cardiovascular Disease	<p>The percentage of males 21–75 years of age and females 40–75 years of age during the measurement year who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and remained on a high-intensity or moderate-intensity statin medication for at least 80% of the treatment period.</p> <p>Suggested Workflow: Providers to prescribe and fill 90-day prescriptions to reduce gaps in treatment.</p> <p>Common Codes for Exclusion (code yearly): Myopathy: G72.0, G72.9; Myositis: M60.80, M60.9; Rhabdomyolysis: M62.82; Cirrhosis: K70.30, K70.31, K71.7, K74.3, K74.4, K74.5, K74.60, K74.69, P78.81; ESRD: N18.5, N18.6, Z99.</p>
	AMR Asthma Medication Ratio	<p>The percentage of members 5–64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.</p> <p>The goal of this measure is to decrease asthma reliever medications (i.e., short-acting, inhaled beta-2 agonists Albuterol or Levalbuterol) in favor of asthma controller medications.</p>

This quick reference is intended to be a tool to aid in improving your 2024 HEDIS® measures for the Blue Cross® Blue Shield® Federal Employee (FEP®) Line of Business. Many gaps can be closed through telehealth visits if properly documented and coded.

**For detailed
information
about this
measure**


[Click
here](#)

2024 Federal Employee Program

HEDIS® Quick Tips

Management of Chronic Conditions



		Codes	Definition
 Management of Chronic Conditions		CBP Controlling High Blood Pressure	<p>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.</p> <p>Blood pressure readings taken by the member on a digital device on the day of the Telehealth visit are acceptable.</p> <p>If initial BP reading is 140/90 or higher, repeat BP.</p> <p>If multiple BP measurements occur on the same date use the lowest systolic and lowest diastolic BP reading.</p> <p>CPT-II Codes Record BOTH systolic and diastolic readings:</p> <p>3074F Most recent systolic blood pressure <130 mm Hg 3078F Most recent diastolic blood pressure < 80 mm Hg 3075F Most recent systolic blood pressure 130-139 mm Hg 3079F Most recent diastolic blood pressure 80-89 mm Hg 3077F Most recent systolic blood pressure >140 mm Hg 3080F Most recent diastolic blood pressure >90 mm Hg</p>
		GSD Glycemic Status Assessment for Patients with Diabetes	<p>The percentage of members 18–75 years of age with diabetes (types 1 and 2) whose most recent glycemic status (hemoglobin A1c [HbA1c] or glucose management indicator [GMI]) was in control (<8.0%)</p> <p>CPT and CPT-II Codes for GSD Control:</p> <p>83036 Hemoglobin; glycosylated (A1C) test 3044F Most recent HbA1c < 7.0% 3046F Most recent HbA1c > 9.0% 3051F Most recent HbA1c ≥ 7.0% and < 8.0% 3052F Most recent HbA1c ≥ 8.0% < or = 9.0%</p>

This quick reference is intended to be a tool to aid in improving your 2024 HEDIS® measures for the Blue Cross® Blue Shield® Federal Employee (FEP®) Line of Business. Many gaps can be closed through telehealth visits if properly documented and coded.


**For detailed
information
about this
measure**

[Click
here](#)

2024 Federal Employee Program HEDIS® Quick Tips

Hospitalization Follow-Up



 Hospitalization Follow-Up	Codes	Definition
	AHU Acute Hospital Utilization	For members 18 years of age and older, the risk-adjusted ratio of observed-to-expected acute inpatient and observation stay discharges during the measurement year. <ul style="list-style-type: none"> Focus on chronic disease control with members, including regular care provider visits, to help prevent and minimize condition complications and exacerbations. Encourage members to come in for annual wellness visits to promote early diagnosis of any conditions, and to help them complete preventive screenings and health promotion activities such as immunizations.
	EDU Emergency Department Utilization	For members 18 years of age and older, the risk-adjusted ratio of observed-to-expected emergency department (ED) visits during the measurement year. Talk with members about appropriate ED use and other options including: <ul style="list-style-type: none"> Asking for same-day appointments Going to urgent care Calling your office's after-hours line Telehealth options Exclusions: <ul style="list-style-type: none"> Principal diagnosis of mental health or chemical dependency Psychiatry Result in an inpatient stay
	FUA Follow-Up After ED Visit for Substance Use	The percentage of emergency department (ED) visits for members 13 years and older with a principal diagnosis of substance use disorder (SUD), or any diagnosis of drug overdose, for which there was follow-up within 30 days of the ED visit (31 total days). Follow-up includes: <ul style="list-style-type: none"> Visits and pharmacotherapy Follow-up includes: events that occur on or within 30 days of the date of the ED visit.: An outpatient, telephone, e-visit, or virtual check-in follow-up visit with a diagnosis of SUD, substance use, or drug overdose. A mental health case management encounter or non-residential substance abuse treatment facility visit that documents assessment for symptoms with a diagnosis of SUD, substance use, or drug overdose.
	FUM Follow-Up After ED Visit for Mental Illness	The percentage of emergency department (ED) visits for members 6 years and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness within 30 days of the ED visit (31 total days). Follow-up includes: <ul style="list-style-type: none"> Visits that occur on or within 30 days of the date of the ED visit: An outpatient, telephone, e-visit, or virtual check-in follow-up visit with a diagnosis of depression or other behavioral health condition. A mental health case management encounter that documents assessment for symptoms with a diagnosis of depression or other behavioral health condition.
	PCR Plan All-Cause Readmissions	For members 18 years and older, the number of acute inpatient and observation stays with a discharge on or between January 1 and December 1 of the measurement year that were followed by an unplanned acute readmission for any diagnosis within 30 days. Two Proven Strategies to Reduce Readmissions: <ol style="list-style-type: none"> Follow-up phone call after discharge Follow-up appointment within 7 days of discharge

This quick reference is intended to be a tool to aid in improving your 2024 HEDIS® measures for the Blue Cross® Blue Shield® Federal Employee (FEP®) Line of Business. Many gaps can be closed through telehealth visits if properly documented and coded.

For detailed information about this measure

Click here

For more information and full HEDIS® specs please visit the National Committee for Quality Assurance at [ncqa.org/wp-content/uploads/HEDIS-MY-2024-Measure-Description.pdf](https://www.ncqa.org/wp-content/uploads/HEDIS-MY-2024-Measure-Description.pdf)