

Reproduced with permission from HEDIS Measurement Year 2020 and Measurement Year 2021, Volume 2: Technical Specifications for Health Plans by the National Committee for Quality Assurance (NCQA). HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA). To purchase copies of this publication, contact NCQA Customer Support at 1-888-275-7585 or visit www.ncqa.org/publications.

EFFECTIVENESS OF CARE: BEHAVIORAL HEALTH Measure/coding tips Measure description **Documentation required** Coding Members 18 years **Antidepressant** The Intake Period (IP) is the 12-month window Members are identified through administrative claims of age and older starting on May1 of the year prior to the MY and pharmacy claims. **Medication** who were treated and ending on April 30 of the MY. **Management (AMM)** with antidepressant Major depression diagnosis: The IPSD is the earliest dispensing date for ICD-10-CM: F32.0, F32.1, F32.2, F32.3, F32.4, F32.9, medication, had a an antidepressant medication in the IP. F33.0, F33.1, F33.2, F33.3, F33.41, F33.9 diagnosis of major depression, and Antidepressant medications: Required exclusions: Miscellaneous antidepressants: bupropion, vilazodone, who remained on Members who meet any of the following an antidepressant vortioxetine criteria are excluded from the measure: Monoamine oxidase inhibitors (MAOIs): iscorboxazid, medication treatment. · In hospice or using hospice services any phenelzine, selegiline, Tranylcypromine Two rates are reported: Phenylpiperazine antidepressants: nefazodone, trazodone time in the MY. 1. Effective acute Psychotherapeutic combinations: amitriptyline-• No encounter with diagnosis of major depression phase treatment: chlordiazepoxide, amitriptyline-perphenazine, during the 121-day period from 60 days prior to The percentage fluoxetine-olanzapine the IPSD, through 60 days after the IPSD. Serotonin and norepinephrine reuptake inhibitor (SNRI) of members who remained on an antidepressants: desvenlafaxine, duloxetine, levomilnacipran, Optional exclusions: venlafaxine antidepressant Noncompliant members may be excluded medication for at least Selective serotonin reuptake inhibitor (SSRI) from the measure with documentation of antidepressants: citalopram, escitalopram, fluoxetine, 84 days (12 weeks). any of the following: fluvoxamine, paroxetine, sertraline 2. Effective continuation · Deceased in the MY. Tetracyclic antidepressants: maprotiline, mirtazapine phase. treatment: Tricyclic antidepressants: amitriptyline, amoxapine, The percentage clomipramine, desipramine, doxepin (>6 mg), imipramine, of members who nortriptyline, protriptyline, trimipramine remained on an antidepressant Note: LOINC and SNOMED codes can be captured medication for at least through electronic data submissions. Please contact 180 days (six months). your Account Executive for more information.

Page 1 of 14 AmeriHealth Caritas Delaware



Follow-Up Care for Children Prescribed ADHD Medication (ADD)

This is also a measure (ADD-E) collected through Electronic Clinical Data Systems. Please discuss options for a direct data feed with your Account Executive. Direct data feeds can improve provider quality performance and reduce the burden of medical record requests.

The percentage of children 6 - 12 years of age who had a newly prescribed ADHD medication and who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed.

Two rates are reported:

1. Initiation phase:

Members who had one follow-up visit with practitioner with prescribing authority during the 30 days following the IPSD.

2. Continuation phase:

Members who remained on the medication for at least 210 days, had a visit in the initiation phase, and had at least two follow-up visits within 270 days after the initiation phase ended.

The Intake Period (IP) is the 12-month window starting March 1 of the year prior to the measurement year (MY) and ending the last calendar day of February of the MY.

The IPSD is the earliest prescription dispensing date for an ADHD medication in the IP.

Telephone and telehealth visits are acceptable in both the initiation and continuation phases.

Only one of the two continuation phase visits can be e-visit or virtual check.

Required exclusions:

Members who meet any of the following criteria are excluded from the measure:

- In hospice or using hospice services any time in the MY.
- · Acute inpatient encounter or discharge with principal diagnosis of mental, behavioral, or neurodevelopmental disorder.

Optional exclusions:

Noncompliant members may be excluded from the measure with documentation of any of the following:

- · Diagnosis of narcolepsy.
- · Deceased in the MY.

Common chart deficiencies:

- · Follow-up visit more than 30 days after initial medication dispensed date.
- · Two additional visits within nine months of starting medication are not documented.

Members are identified through administrative claims and pharmacy claims.

ADHD medications:

CNS stimulants: dexmethylphenidate, dextroamphetamine, lisdexamfetamine, methylphenidate, methamphetamine.

Alpha-2 receptor agonists: clonidine, guanfacine Miscellaneous ADHD medications: atomoxetine

Visit setting unspecified (with outpatient POS, partial hospitalization POS, Community Mental Health Center POS, or Telehealth POS):

CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255

Outpatient POS:

POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 71, 72

Partial hospitalization POS:

POS: 52

Community mental health center POS:

POS: 53

Telehealth POS:

POS: 02

Behavioral health (BH) outpatient:

CPT: 98960, 98961, 98962, 99078, 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99483, 99510

HCPCS: G0155, G0176, G0177, G0409, G0463, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, T1015

UBREV: 0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0900, 0902, 0903, 0904, 0911, 0914, 0915, 0916, 0917, 0919, 0982, 0983

CPT: 99217, 99218, 99219, 99220

Health and behavior assessment or intervention: **CPT:** 96150, 96151, 96152, 96153, 96154, 96156, 96158, 96159, 96164, 96165, 96167, 96168, 96170, 96171

Partial hospitalization or intensive outpatient:

HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485

UBREV: 0905, 0907, 0912, 0913

Telephone visit:

CPT: 98966, 98967, 98968, 99441, 99442, 99443

Online assessments: (continuation phase, one of two visits): CPT: 98969, 98970, 98971, 98972, 98972, 99421, 99422, 99423, 99444, 99457, 99458

HCPCS: G0071, G2010, G2012, G2061, G2062, G2063

Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for more information.



Measure/coding tips

Measure description

Documentation required

Coding

Follow-Up After Hospitalization for Mental Illness (FUH) Percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses and who had a follow-up visit with a mental health provider.

Two rates are reported:

- The percentage of discharges for which the member received follow-up within 30 (calendar) days of discharge.
- 2. The percentage of discharges for which the member received follow-up within seven (calendar) days of discharge.

The measurement year (MY) is January 1 – December 31.

An outpatient visit with a mental health provider within seven and 30 days after discharge. Do not include visits that occur on the date of discharge.

- A visit with a mental health provider in any of the following settings:
- · Outpatient.
- · Behavioral health outpatient.
- · Telehealth visit.
- · Telephone visit.
- · Observation visit.
- · Transitional care management visit.
- · A visit in any of the following settings:
- Intensive outpatient/partial hospitalization.
- · Community mental health center.
- · Electroconvulsive therapy visit.
- · Behavioral health care setting.

Required exclusions:

Members who meet any of the following criteria are excluded from the measure:

 In hospice or using hospice services any time in the MY.

Optional exclusions:

Noncompliant members may be excluded from the measure with documentation of any of the following:

• Deceased in the MY.

Common chart deficiencies:

- Follow-up visit more than seven days or 30 days after discharge.
- Criteria is **not** met by a follow-up on the date of discharge.

Mental illness diagnosis: ICD-10: F20.0, F20.1, F20.2, F20.3, F20.5, F20.81, F20.89, F20.9, F21, F22, F23, F24, F25.0, F25.1, F25.8, F25.9, F28, F29, F30.10, F30.11, F30.12, F30.13, F30.2, F30.3, F30.4, F30.8, F30.9, F31.0, F31.10, F31.11, F31.12, F31.13, F31.2 F31.30, F31.31, F31.32, F31.4, F31.5, F31.60, F31.61, F31.62, F31.63, F31.64, F31.70, F31.71, F31.72, F31.73, F31.74, F31.75, F31.76, F31.77, F31.78, F31.81, F31.89, F31.9, F32.0, F32.1, F32.2, F32.3, F32.4, F32.5, F32.8, F32.81, F32.89, F32.9, F33.0, F33.1, F33.2, F33.3, F33.40, F33.41, F33.42 F33.8, F33.9, F34.0, F34.1, F34.8, F34.81, F34.89, F34.9, F39, F42, F42.2, F42.3, F42.4, F42.8, F42.9, F43.0, F43.10, F43.11, F43.12, F43.20, F43.21, F43.22, F43.23, F43.24, F43.25 F43.29, F43.8, F43.9, F44.89, F53, F53.0, F53.1, F60.0, F60.1, F60.2, F60.3, F60.4, F60.5, F60.6, F60.7, F60.81, F60.89, F60.9, F63.0, F63.1, F63.2, F63.3, F63.81, F63.89, F63.9, F68.10. F68.11, F68.12, F68.13, F68.8, F68.A, F84.0, F84.2, F84.3, F84.5, F84.8, F84.9, F90.0, F90.1, F90.2, F90.8, F90.9, F91.0, F91.1, F91.2, F91.3, F91.8, F91.9, F93.0, F93.8, F93.9, F94.0, F94.1, F94.2, F94.8, F94.9

Intentional self-harm diagnosis:

ICD-10-CM: T14.91XA, T14.91XD, T14.91XS, T36.0X2A, T36.0X2D, T36.0X2S, T36.1X2A, T36.1X2D, T36.1X2S, T36.2X2A, T36.2X2D, T36.2X2S, T36.3X2A, T36.3X2D, T36.3X2S, T36.4X2A, T36.4X2D, T36.4X2S, T36.5X2A, T36.5X2D, T36.5X2S, T36.6X2A, T36.6X2D, T36.6X2S, T36.6X2S, T36.7X2A, T36.7X2D, T36.7X2S, T36.8X2A, T36.8X2D, T36.8X2S, T36.92XA, T36.92XD, T36.92XS, T37.0X2A, T37.0X2D, T37.0X2S, T37.1X2A, T37.1X2D, T37.1X2S, T37.2X2A, T37.2X2D, T37.2X2S, T37.3X2A, T37.3X2D, T37.3X2S, T37.4X2A, T37.4X2D, T37.4X2S, T37.5X2A, T37.5X2D, T37.5X2S, T37.8X2A, T37.8X2D, T37.8X2S, T37.92XA, T37.92XD, T37.92XS, T38.0X2A, T38.0X2D, T38.0X2S, T38.1X2A, T38.1X2D, T38.1X2S, T38.2X2A, T38.2X2D, T38.2X2S, T38.3X2A, T38.3X2D, T38.3X2S, T38.4X2A, T38.4X2D, T38.4X2D, T38.4X2D, T38.5X2A, T38.5X2D, T38.5X25, T38.6X2A, T38.6X2D, T38.6X2S, T38.7X2A, T38.7X2D, T38.7X2D, T38.7X2S, T38.802A, T38.802D, T38.802S, T38.812A, T38.812D, T38.812S, T38.892A, T38.892D, 738.892S, T38.902A, T38.902D, T38.902S, T38.992A, T38.992D, T38.992S, T39.012A, T39.012D, T39.012S, T39.092A, T39.092D, T39.092S, T39.1X2A, T39.1X2D, T39.1X2S, T39.2X2A, T39.2X2D, T39.2X2S, T39.312A, T39.312D, T39.312S, T39.392A, T39.392D, T39.392S, T39.4X2A, T39.4X2D, T39.4X2S, T39.8X2A, T39.8X2D, T39.8X2S, T39.92XA, T39.92XD, T39.92XS, T40.0X2A, T40.0X2D, T40.0X2S, T40.1X2A, T40.1X2D, T40.1X2S, T40.2X2A, T40.2X2D, T40.2X2S, T40.3X2A, T40.3X2D, T40.3X2S, T40.412A, T40.412D, T40.412S, T40.422A, T40.422D, T40.422S, T40.492A, T40.492D, T40.492S, T40.492B, T40.492S, T40.492B, T40.492B, T40.492B, T40.5X2B, T40.5X2B, T40.602A, T40.602D, T40.602S, T40.692A, T40.692D, T40.692S, T40.7X2B, T40.7X2D, T40.7X2S, T40.8X2A, T40.8X2D, T40.8X2B, T40.902A, T40.902D, T40.902S, T40.992A, T40.992D, T40.992S, T41.0X2A, T41.0X2D, T41.0X2S, T41.1X2A, T41.1X2D, T41.1X2S, T41.202A, T41.202D, T41.202S, T41.292A, T41.292D, T41.292S, T41.3X2A, T41.3X2D, T41.3X2S, T41.42XA, T41.42XD, T41.42XS, T41.5X2A, T41.5X2D, T41.5X2S, T42.0X2A, T42.0X2D, T42.0X2S, T42.1X2A, T42.1X2D, T42.1X2S, T42.2X2A, T42.2X2D, T42.2X2S, T42.3X2A, T42.3X2D, T42.3X2S, T42.4X2A, T42.4X2D, T42.4X2S, T42.5X2A, T42.5X2D, T42.5X2S, T42.6X2A, T42.6X2D, T42.6X2S, T42.72XA, T42.72XD, T42.72XS, T42.8X2A, T42.8X2D, T42.8X2S, T43.012A, T43.012D, T43.012S, T43.022A, T43.022D, T43.022S, T43.1X2A, T43.1X2D, T43.1X2S, T43.202A, T43.202D, T43.202S, T43.212A, T43.212D, T43.212S, T43.222A, T43.222D, T43.222S, T43.292A, T43.292D, T43.292S, T43.3X2A, T43.3X2D, T43.3X2S, T43.4X2A, T43.4X2D, T43.4X2S, T43.502A, T43.502D, T43.502S, T43.592A, T43.592D, T43.592S, T43.602A, T43.602D, T43.602S, T43.612A, T43.612D, T43.612S, T43.622A, T43.622D, T43.622S, T43.632A, T43.632D, T43.632S, T43.642A, T43.642D, T43.642S, T43.692A, T43.692D, T43.692S, T43.8X2A, T43.8X2D, T43.8X2S, T43.92XA, T43.92XD, T43.92XS, T44.0X2A, T44.0X2D, T44.0X2S, T44.1X2A, T44.1X2D, T44.1X2S, T44.2X2A, T44.2X2D, T44.2X2S, T44.3X2A, T44.3X2D, T44.3X2S, T44.4X2A, T44.4X2D, T44.4X2S, T44.5X2A, T44.5X2D, T44.5X2S, T44.6X2A, T44.6X2D, T44.6X2S, T44.7X2A, T44.7X2D, T44.7X2S, T44.8X2A, T44.8X2D, T44.8X2S, T44.902A, T44.902D, T44.902S, T44.992A, T44.992D, T44.992S, T45.0X2A, T45.0X2D, T45.0X2S T45.1X2A, T45.1X2D, T45.1X2S, T45.2X2A, T45.2X2D,

Page 3 of 14



Measure/coding tips

Coding

Follow-Up After Hospitalization for Mental Illness (FUH)

(Continued from page 3)

```
T45.2X2S, T45.3X2A, T45.3X2D, T45.3X2S, T45.4X2A, T45.4X2D, T45.4X2S, T45.512A, T45.512D, T45.512S, T45.522A, T45.522D, T45.522D, T45.522S,
  T45.2X25, T45.3X2A, T45.3X2D, T45.3X2S, T45.4X2A, T45.4X2D, T45.4X2S, T45.512D, T45.512D, T45.512S, T45.522A, T45.522D, T45.522S, T45.602A, T45.602A, T45.602B, T46.0X2B, T46.5X2B, T47.5X2B, T47.5X
T48,5X25, T48,6X2A, T48,6X2D, T48,6X25, T48,902A, T48,902b, T48,9025, T48,902b, T48,992b, T48,992b, T49,0X25, T49,1X2A, T49,1X2D, T49,1X2A, T49,1X2D, T49,1X2A, T49,1X2D, T49,1X2B, T50,1X2B, T51,1X2B, T51,1X
  T60.8X2D, T60.8X2S, T60.92XA, T60.92XS, T61.02XA, T61.02XD, T61.02XS, T61.12XA, T61.12XD, T61.12XS, T61.172A, T61.772D, T61.772S, T61.782A, T61.782A, T61.82XD, T61.82XD, T61.82XD, T61.92XD, T61.92XS, T62.0X2A, T62.0X2D, T62.0X2S, T62.1X2A, T62.1X2D, T62.1X2A, T62.2X2D, T62.2X2S, T62.8X2A, T62.8X2D, T62.92XA, T62.92XD, T62.92XS, T63.002D, T63.002S, T63.002D, T63.002S, T63.012D, T63.012S, T63.022D, T63.022D, T63.022S, T63.032A, T63.032D, T63.032S, T63.042A, T63.042D, T63.042S, T63.062D, T63.062S, T63.072A, T63.072D, T63.072S, T63.082D, T63.082D, T63.082S, T63.092A, T63.092B, T63.112D, T63.112S, T63.122A, T63.122D, T63.112D, T63.112D, T63.112D, T63.112S, T63.122D, T63.122D, T63.192D, T63.192D, T63.2X2D, T63.2X2D, T63.2X2D, T63.2X2D, T63.2X2D, T63.302D, T63.302S, T63.302D, T63.302S, T63.312A, T63.312D, T63.312S, T63.322D, T63.322D, T63.322S, T63.332D, T63.332S, T63.332D, T63.392D, T63.392S, T63.412D, T63.412D, T63.412D, T63.422D, T63.422D, T63.422D, T63.432D, T63.432D, T63.432D, T63.432D, T63.442D, T63.442D, T63.442D, T63.442D, T63.452D, T63.512D, T63.512D, T63.512D, T63.512D, T63.592D, T63.592S, T63.612A, T63.612D, T63.612D, T63.612S, T63.622D, T63.622S, T63.62D, T63.622S, T63.62D, T63.622S, T63.62D, T63.622S, T63.62D, T63.822A, T63.822D, T63.822A, T63.822D, T63.822A, T63.822D, T63.822B, T63.822A, T63.822D, T63.822B, T63.822B, T63.822B, T63.822B, T63.822B, T63.822B, T63.822B, T63.832B, 
       T64.82XD, T64.82XS, T65.0X2A, T65.0X2D, T65.0X2D, T65.0X2S, T65.1X2A, T65.1X2D, T65.1X2S, T65.212A, T65.212D, T65.212S, T65.222A, T65.222S, T65.292D, T65.292S, T65.3X2A, T65.3X2D, T65.3X2S, T65.4X2A, T65.4X2D, T65.4X2S, T65.5X2A, T65.5X2D, T65.5X2D, T65.5X2D, T65.6X2A, T65.6X2D, T65.6X2D, T65.6X2D, T65.832A, T65.832D, T65.832B, T65.832D, T65.832B, T71.132B, T71.132B, T71.132B, T71.152B, T71.152B, T71.152B, T71.152B, T71.152B, T71.152B, T71.22B, T7
          T71.232A, T71.232D, T71.2329
```

Visit setting unspecified (with outpatient POS value set including mental health provider, partial hospitalization POS value set, community mental health center POS value set, or telehealth POS value set including mental health provider):

CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222,

99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255

BH outpatient:

CPT: 98960, 98961, 98962, 99078, 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, CPT: 96961, 98961, 96962, 99076, 99201, 99203, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99245, 99341, 99344, 99344, 99345, 99347, 99347, 99348, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99402, 99402, 99403, 99404, 99411, 99412, 99483, 99510

HPCS: G0155, G0176, G0177, G0409, G0463, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, T1015

UBREV: 0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0900, 0902, 0903, 0904, 0911, 0914, 0915, 0916, 0917, 0919, 0982, 0983

Partial hospitalization or intensive outpatient:

HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485

UBREV: 0905, 0907, 0912, 0913

Transitional care management services (with community mental health center POS with mental health provider): **CPT:** 99495, 99496

Electroconvulsive therapy (with ambulatory surgical center POS, community mental health center POS, outpatient POS, or partial hospitalization POS):

ICD-10-PCS: GZB0ZZZ, GZB1ZZZ, GZB2ZZZ, GZB3ZZZ, GZB4ZZZ

Observation (with mental health provider): CPT: 99217, 99218, 99219, 99220

Behavioral health care setting: UBREV: 0513, 0900, 0901, 0902, 0903, 0904, 0905, 0907, 0911, 0912, 0913, 0914, 0915, 0916, 0917, 0919

Telephone visits (with mental health provider): CPT: 98966, 98967, 98968, 99441, 99442, 99443

Ambulatory surgical center POS:

POS: 24

Community mental health center POS: **POS**: 53

Partial hospitalization POS:

POS: 52

Telehealth POS:

POS: 2

Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for



EFFECTIVENESS OF CARE: BEHAVIORAL HEALTH			
Measure/coding tips	Measure description	Documentation required	Coding
Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who are Using Antipsychotic Medications (SSD)	The percentage of members ages 18 – 64 with schizophrenia, schizoaffective disorder, or bipolar disorder who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year (MY).	A glucose test or HbA1c test performed during the MY. Required exclusions: Members who meet any of the following criteria are excluded from the measure: In hospice or using hospice services any time in the MY. Diabetes. Optional exclusions: Noncompliant members may be excluded from the measure with documentation of any of the following: Deceased in the MY.	Glucose lab test: CPT: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951 HbA1c lab test: CPT: 83036, 83037 HbA1c test result or finding: CPT-CAT-II: 3044F, 3046F, 3051F, 3052F Antipsychotic medications: Miscellaneous antipsychotic agents: aripiprazole, asenapine, brexpiprazole, cariprazine, clozapine, haloperidol, iloperidone, loxapine, lurasidone, molindone, olanzapine, paliperidone, quetiapine, risperidone, ziprasidone Phenothiazine antipsychotics: chlorpromazine, fluphenazine, perphenazine, prochlorperazine, thioridazine, trifluoperazine Psychotherapeutic combinations: amitriptyline-perphenazine Thioxanthenes: thiothixene Long-acting injections: aripiprazole, fluphenazine decanoate, haloperidol decanoate, olanzapine, paliperidone palmitate, risperidone Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for more information.
Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)	The percentage of members 18 – 64 years of age with schizophrenia or schizoaffective disorder and diabetes who had both a low-density lipoprotein cholesterol (LDL-C) test and an HbA1c test during the Measurement Year (MY).	An HbA1c test and an LDL-C test performed in the MY. Required exclusions: Members who meet any of the following criteria are excluded from the measure: In hospice or using hospice services any time in the MY. Optional exclusions: Noncompliant members may be excluded from the measure with documentation of any of the following: Do not have a diagnosis of diabetes during the MY and who had a diagnosis of polycystic ovarian syndrome, gestational diabetes, or steroid-induced diabetes in the MY or the year prior.	HbA1c lab test: CPT: 83036, 83037 HbA1c test result or finding: CPT-CAT-II: 3044F, 3046F, 3051F, 3052F LDL-C lab test: CPT: 80061, 83700, 83701, 83704, 83721 LDL-C test result or finding: CPT-CAT-II: 3048F, 3049F, 3050F Must have both A1c and LDL. Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for more information
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia (SMC)	The percentage of members 18 – 64 years of age with schizophrenia or schizoaffective disorder and cardiovascular disease (IVD, CABG, PCI, AMI) who had an LDL-C test during the measurement year (MY).	An LDL-C test performed during the MY. Required exclusions: Members who meet any of the following criteria are excluded from the measure: • In hospice or using hospice services any time in the MY. Optional exclusions: Noncompliant members may be excluded from the measure with documentation of any of the following: • Deceased in the MY.	LDL-C lab test: CPT: 80061, 83700, 83701, 83704, 83721 LDL-C test result or finding: CPT-CAT-II: 3048F, 3049F, 3050F Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for more information.



The percentage of

members 18 years of

age and older during the

MY with schizophrenia or

schizoaffective disorder

and remained on an oral

or long-acting injection

antipsychotic medication

who were dispensed

at least 80% of their

treatment period.

Adherence to
Antipsychotic
Medications for
Individuals with
Schizophrenia (SAA)

Measure/coding tips

Measure description

The index prescription start date (ISPD) is the earliest prescription dispensing date during the MY.

The treatment period is the ISPD through the last day of the MY.

Required exclusions:

Documentation required

Members who meet any of the following criteria are excluded from the measure:

- In hospice or using hospice services any time in the MY.
- 66 80 years of age with frailty and advanced illness during the MY.
- 81 years of age and older with frailty.
- · Diagnosis of dementia in the MY.

Optional exclusions:

Noncompliant members may be excluded from the measure with documentation of any of the following:

· Deceased in the MY.

Coding Schizophrenia Diagnosis:

ICD 10 CM: F20.0, F20.1, F20.2, F20.3, F20.5, F20.81, F20.89, F20.9, F25.0, F25.1, F25.8, F25.9

Long-acting injections, 14-day supply:

HCPCS: J2794

Long-acting injections, 28-day supply:

HCPCS: J0401, J1631, J1943, J1944, J2358, J2426, J2680

Long-acting injections, 30-day supply: HCPCS: J2798

Oral antipsychotic medications:

Miscellaneous antipsychotic agents: aripiprazole, asenapine, brexpiprazole, cariprazine, clozapine, haloperidol, iloperidone, loxapine, lurasidone, molindone, olanzapine, paliperidone, quetiapine, risperidone, ziprasidone

Phenothiazine antipsychotics: chlorpromazine, fluphenazine, perphenazine, prochlorperazine, thioridazine, trifluoperazine Psychotherapeutic combinations: amitriptyline-perphenazine Thioxanthenes: thiothixene

Long-acting injections:

14-day supply: risperidone (excluding Perseris®) long-acting injections, 14-day supply 28-day supply: aripiprazole, fluphenazine decanoate, haloperidol decanoate, olanzapine, paliperidone palmitate

Schizophrenia diagnosis:

30-day supply: risperidone (Perseris®)

ICD-10-CM: F20.0, F20.1, F20.2, F20.3, F20.5, F20.81, F20.89, F20.9, F25.0, F25.1, F25.8, F25.9

Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for more information.

Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET) Adolescent and adult members with a **new** episode of alcohol or other drug abuse (AOD) dependence who received initiation of AOD treatment or engagement of AOD treatment

Two rates are reported:

1. Initiation of AOD treatment: Members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth or medication treatment within 14 days of the diagnosis.

2. Engagement of AOD treatment:

The percentage of members who initiated treatment and who had two or more additional AOD services or medication treatment within 34 days of the initiation visit.

The measurement year (MY) is January 1 – December 31.

Note:

- Methadone is not included in the medication lists for the measure.
- Medication treatment meets criteria for members being treated for alcohol or opioid abuse or dependence. It does not meet the criteria for treatment of other drug abuse or dependence.

Required exclusions:

Members who meet any of the following criteria are excluded from the measure:

• In hospice or using hospice services any time in the MY.

Optional exclusions:

Noncompliant members may be excluded from the measure with documentation of any of the following:

Deceased in the MY.

Opioid use disorder (OUD) monthly office-based treatment (if service that bills monthly or diagnosis from opioid abuse or dependence):

HCPCS: G2086, G2087

IET stand-alone visits (with alcohol abuse and dependence, opioid abuse or dependence or other drug abuse or dependence):

CPT: 98960, 98961, 98962, 99078, 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99384, 99385, 99386, 99387, 99394, 99395, 99397, 99401, 99402, 99403, 99404, 99408, 99409, 99411, 99412, 99483, 99510 **HCPCS:** G0155, G0176, G0177, G0396, G0397, G0409, G0410,

G0411, G0443, G0463, H0001, H0002, H0004, H0005, H0007, H0015, H0016, H0022, H0031, H0034, H0035, H0036, H0037, H0039, H0040, H0047, H2000, H2001, H2010, H2011, H2012, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, H2035, H2036, S0201, S9480, S9484, S9485, T1006, T1012, T1015

UBREV: 0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0900, 0902, 0903, 0904, 0905, 0906, 0907, 0911, 0912, 0913, 0914, 0915, 0916, 0917, 0919, 0944, 0945, 0982, 0983

Observation (with alcohol abuse or dependence, opioid abuse or dependence, or other drug abuse or dependence): CPT: 99217, 99218, 99219, 99220

Telephone visit (with alcohol abuse or dependence, opioid abuse or dependence, or other drug abuse or dependence): CPT: 98966, 98967, 98968, 99441, 99442, 99443

Alcohol abuse or dependence:

$$\label{eq:control_control_control_control} \begin{split} & \textbf{ICD-10-CM:} \ F10.10, F10.120, F10.121, F10.129, F10.130, \\ & F10.131, F10.132, F10.139, F10.14, F10.150, F10.151, \\ & F10.159, F10.180, F10.181, F10.182, F10.188, F10.19, F10.20, \\ & F10.220, F10.221, F10.229, F10.230, F10.231, F10.232, \\ & F10.239, F10.24, F10.250, F10.251, F10.259, F10.26, F10.27, \\ & F10.280, F10.281, F10.282, F10.288, F10.29 \end{split}$$



Measure/coding tips

Coding

Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET)

(Continued from page 6)

Opioid abuse or dependence:

 $\begin{array}{l} \textbf{ICD-10-CM:} \ F11.10, \ F11.120, \ F11.121, \ F11.122, \ F11.129, \ F11.13, \ F11.14, \ F11.150, \ F11.151, \ F11.159, \ F11.181, \ F11.182, \ F11.188, \ F11.19, \ F11.20, \ F11.220, \ F11.221, \ F11.222, \ F11.229, \ F11.23, \ F11.250, \ F11.251, \ F11.259, \ F11.281, \ F11.282, \ F11.288, \ F11.29 \\ \end{array}$

Other drug abuse or dependence:

ICD-10-CM: F12.10, F12.120, F12.121, F12.122, F12.129, F12.13, F12.150, F12.151, F12.159, F12.180, F12.188, F12.19, F12.20, F12.220, F12.221, F12.222, F12.229, F12.23, F12.250, F12.251, F12.259, F12.280, F12.288, F12.29, F13.10, F13.120, F13.121, F13.129, F13.130, F13.131, F13.132, F13.139, F13.14, F13.150, F13.151, F13.159, F13.180, F13.181, F13.182, F13.188, F13.19, F13.20, F13.20, F13.221, F13.229, F13.230, F13.231, F13.232, F13.239, F13.24, F13.250, F13.259, F13.269, F13.26, F13.27, F13.280, F13.281, F13.282, F13.288, F13.29, F14.10, F14.120, F14.121, F14.122, F14.129, F14.13, F14.14, F14.150, F14.151, F14.159, F14.180, F14.181, F14.182, F14.188, F14.19, F14.20, F14.221, F14.222, F14.229, F14.23, F14.24, F14.250, F14.251, F14.259, F14.280, F14.281, F14.282, F14.288, F14.29, F15.10, F15.120, F15.121, F15.122, F15.129, F15.13, F15.14, F15.150, F15.151, F15.159, F15.180, F15.181, F15.182, F15.188, F15.19, F15.20, F15.220, F15.221, F15.222, F15.229, F15.23, F15.24, F15.250, F15.251, F15.259, F15.280, F15.281, F15.282, F15.288, F15.29, F16.10, F16.120, F16.121, F16.122, F16.129, F16.14, F16.150, F16.151, F16.159, F16.180, F16.183, F16.188, F16.19, F16.20, F16.220, F16.221, F16.229, F16.24, F16.250, F16.251, F16.259, F16.280, F16.283, F16.288, F16.29, F18.10, F18.120, F18.121, F18.129, F18.14, F18.150, F18.151, F18.159, F18.17, F18.180, F18.188, F18.19, F18.20, F18.20, F18.220, F18.221, F18.229, F18.24, F18.250, F18.251, F18.259, F18.27, F18.280, F18.288, F18.29, F19.10, F19.120, F19.121, F19.122, F19.129, F19.130, F19.131, F19.132, F19.139, F19.14, F19.150, F19.151, F19.159, F19.16, F19.17, F19.180, F19.181, F19.182, F19.188, F19.29, F19.280, F19.281, F19.282, F19.288, F19.29, F19.230, F19.231, F19.232, F19.239, F19.24, F19.250, F19.251, F19.259, F19.26, F19.27, F19.280, F19.281, F19.282, F19.288, F19.29

IET visits group 1 (with IET POS group 1 and alcohol abuse or dependence, opioid abuse or dependence or other drug abuse or dependence):

CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876

IET POS group 1:

POS: 02, 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 52, 53, 57, 58, 71, 72

IET visits group 2 (with IET POS group 2 and alcohol abuse or dependence, opioid abuse or dependence or other drug abuse or dependence):

CPT: 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255

IET POS group 2:

POS: 02, 52, 53

Online assessments (with alcohol abuse or dependence, opioid abuse or dependence or other drug abuse or dependence):

CPT: 98969, 98970, 98971, 98972, 98972, 99421, 99422, 99423, 99444, 99457, 99458

HCPCS: G0071, G2010, G2012, G2061, G2062, G2063

OUD weekly nondrug service (if diagnosis from opioid abuse or dependence):

HCPCS: G2071, G2074, G2075, G2076, G2077, G2080

OUD weekly drug treatment service (if diagnosis from opioid abuse or dependence):

 $\textbf{HCPCS:}\ G2067, G2068, G2069, G2070, G2072, G2073$

AOD medication treatment (if diagnosis from alcohol abuse or dependence or opioid abuse or dependence):

HCPCS: H0020, H0033, J0570, J0571, J0572, J0573, J0574, J0575, J2315, Q9991, Q9992, S0109

Alcohol use disorder treatment medications list (if diagnosis from alcohol abuse or dependence):

Aldehyde dehydrogenase inhibitor: disulfiram (oral)

Antagonist: naltrexone (oral and injectable)

Other: acamprosate (oral, delayed-release tablet)

Opioid use disorder treatment medications (if diagnosis from opioid abuse or dependence):

Antagonist: naltrexone (oral and injectable)

Partial agonist: buprenorphine (sublingual tablet, injection, implant), buprenorphine/naloxone (sublingual tablet, buccal film, sublingual film)

Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for more information.

Measure/coding tips Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM) This is also a measure (APM-E) collected

This is also a measure (APM-E) collected through Electronic Clinical Data Systems. Please discuss options for a direct data feed with your Account Executive. Direct data feeds can improve provider quality performance and reduce the burden of medical record requests.

Measure description | Documentation required

Children and adolescents ages 1 –17 who had two or more antipsychotic

prescriptions and had

metabolic testing.

Both of the following during the MY.

- At least one test for blood glucose or HbA1c.
- At least one test for low-density lipoprotein cholesterol (LDL-C) or cholesterol.

Required exclusions:

Members who meet any of the following criteria are excluded from the measure:

• In hospice or using hospice services any time in the MY.

Optional exclusions:

Noncompliant members may be excluded from the measure with documentation of any of the following:

· Deceased in the MY.

Common chart deficiencies:

A1C, LDL-C ordered but not completed.

Coding

Members are identified through administrative claims and pharmacy claims.

Glucose lab test:

CPT: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951

HbA1c lab test:

CPT: 83036, 83037

HbA1c test result or finding:

CPT-CAT-II: 3044F, 3046F, 3051F, 3052F

Cholesterol lab test:

CPT: 82465, 83718, 83722, 84478

LDL-C lab test:

CPT: 80061, 83700, 83701, 83704, 83721

LDL-C test result or finding:

CPT-CAT-II: 3048F, 3049F, 3050F

Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for more information.



Measure/coding tips

Measure description

Documentation required

Coding

Follow-Up After Emergency Department Visit for Mental Illness (FUM) The percentage of emergency department (ED) visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness.

Two rates are reported:

- 1. The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days).
- 2. The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).

A follow up visit with any practitioner, with a principal diagnosis of a mental health disorder or with a principal diagnosis of intentional self-harm and any diagnosis of a mental health disorder within 7 and 30 days after ED visit. Include outpatient visits, behavioral health outpatient visits, intensive outpatient visits, partial hospitalizations, community mental health visits, electroconvulsive therapy visits, telehealth visits, and observation visits.

Includes visits that occur on the date of the ED visit

Telephone visits, e-visits and virtual check-ins are acceptable.

Required exclusions:

Members who meet any of the following criteria are excluded from the measure:

• In hospice or using hospice services any time in the MY.

Optional exclusions:

Noncompliant members may be excluded from the measure with documentation of any of the following:

· Deceased in the MY.

Mental illness diagnosis:

ICD-10: F20.0, F20.1, F20.2, F20.3, F20.5, F20.81, F20.89, F20.9, F21, F22, F23, F24, F25.0, F25.1, F25.8, F25.9, F28, F29, F30.10, F30.11, F30.12, F30.13, F30.2, F30.3, F30.4, F30.8, F30.9, F31.0, F31.10, F31.11, F31.12, F31.13, F31.2, F31.30, F31.31, F31.32, F31.4, F31.5, F31.60, F31.61, F31.62, F31.63, F31.64, F31.70, F31.71, F31.72, F31.73, F31.74, F31.75, F31.76, F31.77, F31.78, F31.81, F31.89, F31.9, F32.0, F32.1, F32.2, F32.3, F32.4, F32.5, F32.8, F32.81, F32.89, F32.9, F33.0, F33.1, F33.2, F33.3, F33.40, F33.41, F33.42, F33.8, F33.9, F34.0, F34.1, F34.8, F34.81, F34.89, F34.9, F39, F42, F42.2, F42.3, F42.4, F42.8, F42.9, F43.0, F43.10, F43.11, F43.12, F43.20, F43.21, F43.22, F43.23, F43.24, F43.25, F43.29, F43.8, F43.9, F44.89, F53, F53.0, F53.1, F60.0, F60.1, F60.2, F60.3, F60.4, F60.5, F60.6, F60.7, F60.81, F60.89, F60.9, F63.0, F63.1, F63.2, F63.3, F63.81, F63.89, F63.9, F68.10, F68.11, F68.12 F68.13, F68.8, F68.A, F84.0, F84.2, F84.3, F84.5, F84.8, F84.9, F90.0, F90.1, F90.2, F90.8, F90.9, F91.0, F91.1, F91.2, F91.3, F91.8, F91.9, F93.0, F93.8, F93.9, F94.0, F94.1, F94.2, F94.8, F949

Intentional self-harm diagnosis:

ICD-10-CM: T14.91XA, T14.91XD, T14.91XS, T36.0X2A, T36.0X2D, T36.0X2S, T36.1X2A, T36.1X2D, T36.1X2S, T36.2X2A, T36.2X2D, T36.2X2S, T36.3X2A, T36.3X2D, T36.3X2S, T36.4X2A, T36.4X2D, T36.4X2S, T36.5X2A, T36.5X2D, T36.5X2S, T36.6X2A, T36.6X2D, T36.6X2S, T36.7X2A, T36.7X2D, T36.7X2S, T36.8X2A, T36.8X2D, 736.8X2S, T36.92XA, T36.92XD, T36.92XS, T37.0X2A, T37.0X2D, T37.0X2S, T37.1X2A, T37.1X2D, T37.1X2S, T37.2X2A, T37.2X2D, T37.2X2S, T37.3X2A, T37.3X2D, T37.3X2S, T37.4X2A, T37.4X2D, T37.4X2S, T37.5X2A, T37.5X2D, T37.4X2A, T37.4X2D, T37.4X2D, T37.5X2A, T37.5X2D, T37.5X2S, T37.8X2A, T37.8X2D, T37.8X2S, T37.92XA, T37.92XD, T37.92XS, T38.0X2A, T38.0X2D, T38.1X2A, T38.1X2D, T38.1X2S, T38.2X2A, T38.2X2D, T38.2X2S, T38.3X2A, T38.3X2D, T38.3X2S, T38.4X2A, T38.4X2D, T38.4X2S, T38.5X2A, T38.5X2D, T38.5X2S, T38.6X2A, T38.6X2D, T38.6X2S, T38.7X2A, T38.7X2D, T38.7X2S, T38.802A, T38.802D, T38.802S, T38.812A, T38.812D, T38.812S, T38.892A, T38.892D, T38.892S, T38.902A, T38.902D, T38.902S, T38.902A, T38.902D, T38.9012D, T39.012D, T39.012S, T39.092A, T39.092D, T39.092S, T39.1X2A, T39.1X2D, T39.1X2S, T39.2X2A, T39.2X2D, T39.2X2S, T39.312A, T39.312D, T39.312S, T39.392A, T39.392D, T39.392S, T39.4X2A, T39.4X2D, T39.4X2S, T39.8X2A, T39.8X2D, T39.8X2D, T39.8X2D, T39.92XA, T39.92XD, T39.92XS, T40.0X2A, T40.0X2D, T40.0X2S, T40.1X2A, T40.1X2D, T40.1X2S, T40.2X2A, T40.2X2D, T40.2X2D, T40.2X2S, T40.3X2D, T40.3X2S, T40.412A, T40.412D, T40.412S, T40.422A, T40.422D, T40.422S, T40.492A, T40.492D, T40.492S, T40.4X2A, T40.4X2D, T40.4X2S, T40.5X2A, T40.5X2D, T40.5X2S, T40.602A, T40.602D, T40.602S, T40.692A, T40.692D, T40.692S, T40.7X2A, T40.7X2D, T40.7X2S, T40.8X2A, T40.8X2D, T40.8X2B, T40.902A, T40.902D, T40.902S, T40.992A, T40.992D, T40.992S, T41.0X2A, T41.0X2D, T41.0X2S, T41.1X2A, T41.1X2D, T41.1X2S, T41.202A, T41.202D, T41.202S, T41.292A, T41.292D, T41.2925, T41.3X2A, T41.3X2D, T41.3X25, T41.42XA, T41.42XD, T41.42XS, T41.5X2A, T41.5X2D, T41.5X2S, T42.0X2A, T42.0X2D, T42.0X2S, T42.1X2A, T42.1X2D, T42.1X2S, T42.2X2A, T42.2X2D, T42.2X2S, T42.3X2A, T42.3X2D, T42.3X2S, T42.4X2A, T42.4X2D, T42.4X2S, T42.5X2A, T42.5X2D, T42.5X2S, T42.6X2A, T42.6X2D, T42.6X25, T42.72X6, T42.72X0, T42.72X5, T42.6X27, T42.6X27, T42.8X20, T42.8X20, T42.8X25, T43.012A, T43.012D, T43.012S, T43.022A, T43.022D, T43.022S, T43.1X2A, T43.1X2D, T43.1X25, T43.202A, T43.202D, T43.202S, T43.212A, T43.212D, T43.212S, T43.222A, T43.222D, T43.222S, T43.292A, T43.292D, T43.292S, T43.3X2A, T43.3X2D, T43.3X2S, T43.4X2A, T43.4X2D, T43.4X2S, T43.502A, T43.502D, T43.502D, T43.502D, T43.502D, T43.592D, T43.592D, T43.602A, T43.602D, T43.602D, T43.602D, T43.612A, T43.612D, T43.612S, T43.622A, T43.622D, T43.622S, T43.632A, T43.632D, T43.632S, T43.642A, T43.642D, T43.642S, T43.692A, T43.692D, T43.692S, T43.8X2A, T43.8X2D, T43.8X2S, T43.92XA, T43.92XD, T43.92XS, T44.0X2A, T44,0X2D, T44,0X2S, T44,1X2A, T44,1X2D, T44,1X2S, T44,2X2A, T44,2X2D, T44,2X2D, T44,3X2D, T44,3X2D, T44,3X2D, T44,3X2D, T44,3X2D, T44,3X2D, T44,5X2D, T44,5X T44.7X2A, T44.7X2D, T44.7X2S, T44.8X2A, T44.8X2D, T44.8X2S, T44.902A, T44.902D, T44.902S, T44.992A, T44.992D, T44.992S, T45.0X2A, T45.0X2D, T45.0X2S, T45.1X2A, T45.1X2D, T45.1X2S, T45.2X2A, T45.2X2D, T45.2X2A, T45.3X2A, T45.3X2D, T45.3X2S, T45.4X2A, T45.4X2D, T45.4X2S, T45.512A, T45.512D, T45.512S,

Page 8 of 14 AmeriHealth Caritas Delaware



Measure/coding tips

Coding

Follow-Up After Emergency Department Visit for Mental Illness (FUM)

(Continued from page 8)

```
T45.522A, T45.522B, T45.522B, T45.602A, T45.602D, T45.602S, T45.612A, T45.612D, T45.612S, T45.622A, T45.622D, T45.622S, T45.622A, T45.622B, T45.692B, T45.69
             T45.522A, T45.522D, T45.522S, T45.602A, T45.602D, T45.602S, T45.612A, T45.612D, T45.612S, T45.622A, T45.622D, T45.622S, T45.692A
           T65.832D, T65.832S, T65.892A, T65.892D, T65.892S, T65.92XA, T65.92XD, T65.92XS, T71.112A, T71.112D, T71.112S, T71.122A, T71.122D, T71.122S, T71.132A, T71.132D, T71.132D, T71.152A, T71.152D, T71.152S, T71.162A, T71.162D, T71.162S, T71.192A, T71.192D, T71.192S, T71.222A, T71.222B, T71.232A, T71.232B, T71.23B, T71.23B,
```

Visit setting unspecified (with outpatient POS value set, partial hospitalization POS value set, community mental health center POS value set, or telehealth POS value set and principal diagnosis of mental health or principal diagnosis of intentional self-harm with any diagnosis of mental health):

CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255

BH outpatient (with principal diagnosis of mental health or principal diagnosis of intentional self-harm with any diagnosis of mental health):

CPT: 98960, 98961, 98962, 99078, 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99341, 99342, 99344, 99345, 99344, 99345, 99347, 99346, 99349, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99483, 99510

HPCS: G0155, G0176, G0177, G0409, G0463, H0002, H0004, H0031, H0034, H0037, H0039, H0040, H2000, H2011, H2013, H2014, H2015, H2017, H2018, H2019, H2020, T1015

UBREV: 0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0900, 0902, 0903, 0904, 0911, 0914, 0915, 0916, 0917, 0919, 0982, 0983

Partial hospitalization or intensive outpatient (with principal diagnosis of mental health or principal diagnosis of intentional self-harm with any diagnosis of mental health): HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485 UBREV: 0905, 0907, 0912, 0913

Electroconvulsive therapy (with ambulatory surgical center POS, community mental health center POS, outpatient POS, or partial hospitalization POS and principal diagnosis of mental health or principal diagnosis of intentional self-harm with any diagnosis of mental health): **CPT:** 99495, 99496, 99381, 99382, 99391, 99392

Observation (with principal diagnosis of mental health or principal diagnosis of intentional self-harm with any diagnosis of mental health): CPT: 99217, 99218, 99219, 99220

Telephone visits (with principal diagnosis of mental health or principal diagnosis of intentional self-harm with any diagnosis of mental health): **CPT:** 98966, 98967, 98968, 99441, 99442, 99443

Online assessments (with principal diagnosis of mental health or principal diagnosis of intentional self-harm with any diagnosis of mental health): CPT: 98969, 98970, 98971, 98972, 98972, 99421, 99422, 99423, 99444, 99457, 99458

HCPCS: G0071, G2010, G2012, G2061, G2062, G2063

Ambulatory surgical center POS:

POS: 24

Community mental health center POS:

POS: 53

Outpatient POS:

POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 71, 72

Partial hospitalization POS:

POS: 52

Telehealth POS:

POS: 2

Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for more information.



Measure/coding tips

Measure description

Documentation required

Coding

Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA) The percentage of emergency department (ED) visits for members 13 years of age and older with a principal diagnosis of alcohol or other drug (AOD) abuse or dependence, who had a follow up visit for AOD.

Two rates are reported:

- 1.The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days).
- 2. The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).

A follow-up visit with any practitioner, with a principal diagnosis of AOD within 30 days after the ED visit (31 total days). Includes visits that occur on the date of the ED visit.

A follow-up visit with any practitioner, with a principal diagnosis of AOD within 7 days after the ED visit (8 total days). Include visits that occur on the date of the ED visit.

Required exclusions:

Members who meet any of the following criteria are excluded from the measure:

• In hospice or using hospice services any time in the MY.

Optional exclusions:

Noncompliant members may be excluded from the measure with documentation of any of the following:

• Deceased in the MY.

AOD abuse or dependence diagnosis: ICD-10: F10.10, F10.120, F10.121, F10.129, F10.130, F10.131, F10.132, F10.139, F10.14, F10.150, F10.151, F10.159, F10.180, F10.181, F10.182, F10.188, F10.19, F10.20, F10.220, F10.221, F10.229, F10.230, F10.231, F10.232, F10.239, F10.24, F10.250, F10.251, F10.259, F10.26, F10.27, F10.280, F10.281, F10.282, F10.288, F10.29, F11.10, F11.120, F11.121, F11.122, F11.129, F11.13, F11.14, F11.150, F11.151, F11.159. F11.181, F11.182, F11.188, F11.19, F11.20, F11.220, F11.221, F11,222, F11,229, F11,23, F11,24, F11,250, F11,251, F11,259. F11.281, F11.282, F11.288, F11.29, F12.10, F12.120, F12.121, F12.122, F12.129, F12.13, F12.150, F12.151, F12.159, F12.180, F12.188, F12.19, F12.20, F12.220, F12.221, F12.222, F12.229, F12.23, F12.250, F12.251, F12.259, F12.280, F12.288, F12.29, F13.10, F13.120, F13.121, F13.129, F13.130, F13.131, F13.132, F13.139, F13.14, F13.150, F13.151,

F13.220, F13.221, F13.229, F13.230, F13.231, F13.232, F13.239, F13.24, F13.250, F13.251, F13.259, F13.26, F13.27, F13.280, F13.281, F13.282, F13.288, F13.29, F14.10, F14.120, F14.121, F14.120, F14.13, F14.14, F14.150, F

F13.159, F13.180, F13.181, F13.182, F13.188, F13.19, F13.20,

F14.159, F14.180, F14.181, F14.182, F14.188, F14.19, F14.20, F14.220, F14.221, F14.222, F14.229, F14.23, F14.24, F14.250, F14.251, F14.259, F14.280, F14.281, F14.282, F14.288, F14.29, F15.10, F15.120, F15.121, F15.122, F15.129, F15.13, F15.14, F15.150, F15.151, F15.159, F15.180, F15.181,

F15.229, F15.23, F15.24, F15.250, F15.251, F15.259, F15.280, F15.281, F15.282, F15.288, F15.29, F16.10, F16.120, F16.121, F16.122, F16.129, F16.14, F16.150, F16.151, F16.159,

F15.182, F15.188, F15.19, F15.20, F15.220, F15.221, F15.222,

F16.122, F16.123, F16.14, F16.130, F16.131, F16.139, F16.180, F16.183, F16.188, F16.19, F16.20, F16.220, F16.221, F16.229, F16.24, F16.250, F16.251, F16.259, F16.280, F16.283, F16.288, F16.29, F18.10, F18.120, F18.121, F18.129, F18.14, F18.150, F18.151, F18.159, F18.17, F18.180, F18.188,

F18.19, F18.20, F18.220, F18.221, F18.229, F18.24, F18.250, F18.251, F18.259, F18.27, F18.280, F18.288, F18.29, F19.10, F19.120, F19.121, F19.122, F19.129, F19.130, F19.131, F19.131, F19.132, F19.139, F19.14, F19.150, F19.151,

F19.159, F19.16, F19.17, F19.180, F19.181, F19.182, F19.188, F19.19, F19.20, F19.220, F19.221, F19.222, F19.229, F19.230, F19.231, F19.232, F19.239, F19.24, F19.250, F19.251, F19.259, F19.26, F19.27, F19.280, F19.281, F19.282, F19.288, F19.29

IET stand-alone visits (with a principal diagnosis of AOD abuse or dependence):

CPT: 98960, 98961, 98962, 99078, 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99408, 99409, 99411, 99412, 99483, 99510

HCPCS: G0155, G0176, G0177, G0396, G0397, G0409, G0410, G0411, G0443, G0463, H0001, H0002, H0004, H0005, H0007, H0015, H0016, H0022, H0031, H0034, H0035, H0036, H0037, H0039, H0040, H0047, H2000, H2001, H2010, H2011, H2012, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, H2035, H2036, S0201, S9480, S9484, S9485, T1006, T1012, T1015

UBREV: 0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0900, 0902, 0903, 0904, 0905, 0906, 0907, 0911, 0912, 0913, 0914, 0915, 0916, 0917, 0919, 0944, 0945, 0982, 0983

OUD weekly nondrug service (with a principal diagnosis of AOD abuse or dependence): HCPCS: G2071, G2074, G2075, G2076, G2077, G2080

ncrcs. d20/1, d20/4, d20/5, d20/6, d20/7, d2060

OUD monthly office-based treatment (with a principal diagnosis of AOD abuse or dependence): HCPCS: G2086. G2087



Measure/coding tips

Coding

Follow-Up After Emergency Other Drug Abuse or

Department Visit for Alcohol and Dependence (FUA)

(Continued from page 10) OUD weekly drug treatment service (with a principal diagnosis of AOD abuse or dependence):

HCPCS: G2067, G2068, G2069, G2070, G2072, G2073

IET visits group 1 (with IET POS group 1 and a principal diagnosis of AOD abuse or dependence):

CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876

IET POS group 1:

POS: 02, 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 52, 53, 57, 58, 71, 72

IET visits group 2 (with IET POS group 1 and a principal diagnosis of AOD abuse or dependence):

CPT: 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255

IET POS group 2:

POS: 02, 52, 53

Observation (with IET POS group 1 and a principal diagnosis of AOD abuse or dependence):

CPT: 99217, 99218, 99219, 99220

Telephone visits (with IET POS group 1 and a principal diagnosis of AOD abuse or dependence):

CPT: 98966, 98967, 98968, 99441, 99442, 99443

Online assessments (with IET POS group 1 and a principal diagnosis of AOD abuse or dependence):

CPT: 98969, 98970, 98971, 98972, 98972, 99421, 99422, 99423, 99444, 99457, 99458

HCPCS: G0071, G2010, G2012, G2061, G2062, G2063

Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for more information.



Measure/coding tips

Measure description

Documentation required

AOD abuse or dependence diagnosis:

Coding

Follow-Up After High-Intensity Care for Substance Use Disorder (FUI) Members 13 years of age or older who had an acute inpatient hospitalization, residential treatment or detoxification visit for a diagnosis of substance use disorder that resulted in a follow-up visit or service for substance use disorder.

The percentage of acute inpatient hospitalizations, residential treatments, 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:

Seven-day follow-up: A follow-up visit or event with any practitioner for a principal diagnosis of substance use disorder within the seven days after an episode for substance use disorder.

30-day follow-up: A follow-up visit or event with any practitioner for a principal diagnosis of substance use disorder within the 30 days after an episode for substance use disorder.

Note:

- Methadone is not included in the medication lists for the measure.
- Follow-up does not include detoxification.

Required exclusions:

Members who meet any of the following criteria are excluded from the measure:

• In hospice or using hospice services any time in the MY.

Optional exclusions:

Noncompliant members may be excluded from the measure with documentation of any of the following:

· Deceased in the MY.

ICD-10: F10.10, F10.120, F10.121, F10.129, F10.130, F10.131, F10.132, F10.139, F10.14, F10.150, F10.151, F10.159, F10.180, F10.181, F10.182, F10.188, F10.19, F10.20, F10.220, F10.221, F10.229, F10.230, F10.231, F10.232, F10.239, F10.24, F10.250, F10.251, F10.259, F10.26, F10.27, F10.280, F10.281, F10.282, F10.288, F10.29, F11.10, F11.120, F11.121, F11.122, F11.129, F11.13, F11.14, F11.150, F11.151, F11.159, F11.181, F11.182, F11.188, F11.19, F11.20, F11.220, F11.221, F11.222, F11.229, F11.23, F11.24, F11.250, F11.251, F11.259, F11.281, F11.282, F11.288, F11.29, F12.10, F12.120, F12.121, F12.122, F12.129, F12.13, F12.150, F12.151, F12.159, F12.180, F12.188, F12.19, F12.20, F12.220, F12.221, F12.222, F12.229, F12.23, F12.250, F12.251, F12.259, F12.280, F12.288, F12.29, F13.10, F13.120, F13.121, F13.129, F13.130, F13.131, F13.132, F13.139, F13.14, F13.150, F13.151, F13.159, F13.180, F13.181, F13.182, F13.188, F13.19, F13.20, F13.220, F13.221, F13.229, F13.230, F13.231, F13.232 F13.239, F13.24, F13.250, F13.251, F13.259, F13.26, F13.27, F13.280, F13.281, F13.282, F13.288, F13.29, F14.10, F14.120, F14.121, F14.122, F14.129, F14.13, F14.14, F14.150, F14.151, F14.159, F14.180, F14.181, F14.182, F14.188, F14.19, F14.20. F14.220, F14.221, F14.222, F14.229, F14.23, F14.24, F14.250, F14.251, F14.259, F14.280, F14.281, F14.282, F14.288, F14.29, F15.10, F15.120, F15.121, F15.122, F15.129, F15.13, F15.14, F15.150, F15.151, F15.159, F15.180, F15.181, F15.182, F15.188, F15.19, F15.20, F15.220, F15.221, F15.222, F15.229, F15.23, F15.24, F15.250, F15.251, F15.259, F15.280, F15.281, F15.282, F15.288, F15.29, F16.10, F16.120, F16.121, F16.122, F16.129, F16.14, F16.150, F16.151, F16.159, F16.180, F16.183, F16.188, F16.19, F16.20, F16.220, F16.221, F16.229, F16.24, F16.250, F16.251, F16.259, F16.280, F16.283, F16.288, F16.29, F18.10, F18.120, F18.121, F18.129, F18.14, F18.150, F18.151, F18.159, F18.17, F18.180, F18.188, F18.19, F18.20, F18.220, F18.221, F18.229, F18.24, F18.250, F18.251, F18.259, F18.27, F18.280, F18.288, F18.29, F19.10. F19.120, F19.121, F19.122, F19.129, F19.130, F19.131, F19.131, F19.132, F19.139, F19.14, F19.150, F19.151, F19.159, F19.16, F19.17, F19.180, F19.181, F19.182, F19.188, F19.19, F19.20, F19.220, F19.221, F19.222, F19.229, F19.230, F19.231, F19.232, F19.239, F19.24, F19.250, F19.251, F19.259, F19.26, F19.27, F19.280, F19.281, F19.282, F19.288, F19.29

IET stand-alone visits (with a principal diagnosis of AOD abuse or dependence):

CPT: 98960, 98961, 98962, 99078, 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99384, 99385, 99386, 99387, 99401, 99402, 99403, 99404, 99408, 99409, 99411, 99412, 99483, 99510 **HCPCS:** G0155, G0176, G0177, G0396, G0397, G0409, G0410, G0411, G0441, G0443, G0463, H0001, H0002, H0004, H0005, H0007, H0015, H0016, H0022, H0031, H0034, H0035, H0036, H0037, H0039, H0040, H0047, H2000, H2001, H2011, H2011, H2012, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, H2035, H2036, S0201, S9480, S9484, S9485, T1006, T1012, T1015

UBREV: 0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0900, 0902, 0903, 0904, 0905, 0906, 0907, 0911, 0912, 0913, 0914, 0915, 0916, 0917, 0919, 0944, 0945, 0982, 0983

OUD weekly nondrug service (with a principal diagnosis of AOD abuse or dependence):

HCPCS: G2071, G2074, G2075, G2076, G2077, G2080

OUD monthly office-based treatment (with a principal diagnosis of AOD abuse or dependence): HCPCS: G2086, G2087

IET visits group 1 (with IET POS group 1 and a principal diagnosis of AOD abuse or dependence):

CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876



Measure/coding tips

Coding

Follow-Up After High-Intensity Care for Substance Use Disorder (FUI)

(Continued from page 12)

IET POS group 1:

POS: 02, 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 52, 53, 57, 58, 71, 72

IET visits group 2 (with IET POS Group 1 and a principal diagnosis of AOD abuse or dependence): CPT: 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255

IET POS group 2:

POS: 02, 52, 53

Observation (with IET POS group 1 and a principal diagnosis of AOD abuse or dependence):

CPT: 99217, 99218, 99219, 99220

Residential behavioral health treatment (with a principal diagnosis of AOD abuse or dependence):

HCPCS: H0017, H0018, H0019, T2048

Telephone visits (with IET POS group 1 and a principal diagnosis of AOD abuse or dependence):

CPT: 98966, 98967, 98968, 99441, 99442, 99443

Online assessments (with IET POS group 1 and a principal diagnosis of AOD abuse or dependence):

CPT: 98969, 98970, 98971, 98972, 98972, 99421, 99422, 99423, 99444, 99457, 99458

HCPCS: G0071, G2010, G2012, G2061, G2062, G2063

AOD medication treatment:

HPCPS: H0020, H0033, J0570, J0571, J0572, J0573, J0574, J0575, J2315, Q9991, Q9992, S0109

OUD weekly drug treatment service:

HCPCS: G2067, G2068, G2069, G2070, G2072, G2073

Dispensing event of:

Alcohol use disorder treatment medications:

Aldehyde dehydrogenase inhibitor: disulfiram (oral)

Antagonist: naltrexone (oral and injectable)

Other: acamprosate (oral and delayed-release tablet)

Opioid use disorder treatment medications:

Antagonist: naltrexone (oral and injectable)

Partial agonist: buprenorphine (sublingual tablet, injection, implant), buprenorphine/naloxone (sublingual tablet, buccal film, sublingual film)

Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for

more information.

Measure/coding tips

Pharmacotherapy for Opioid Use Disorder (POD)

The percentage of new OUD pharmacotherapy events with OUD pharmacotherapy for 180 or more days among members age 16 and older with a diagnosis of OUD.

Measure description

Documentation required

Intake period: 12-month period that begins on July 1 of the year prior to the MY and ends on June 30 of the MY.

The treatment period (TP) is the date of an OUD dispensing event or OUD medication administration event during the IP. No more than an 8-day gap is allowed during the TP.

Note:

 Methadone is not included in the medication lists for the measure.

Required exclusions:

Members who meet any of the following criteria are excluded from the measure:

 In hospice or using hospice services any time in the MY.

Optional exclusions:

Noncompliant members may be excluded from the measure with documentation of any of the following:

· Deceased in the MY.

Coding

Antagonist: naltrexone (oral)

Antagonist: naltrexone (injectable)

Partial agonist: buprenorphine (sublingual tablet), buprenorphine (injection), buprenorphine (implant), buprenorphine/naloxone (sublingual tablet, buccal film, sublingual film)

sublingual film)

Agonist: methadone (oral) is only acceptable when billed on a medical claim. A pharmacy claim would be indicative of treatment for pain rather than OUD.

Buprenorphine implant:

HCPCS: G2070, G2072, J0570

Buprenorphine injection:

HCPCS: G2069, Q9991, Q9992

Buprenorphine naloxone:

HCPCS: J0572, J0573, J0574, J0575

Buprenorphine oral:

HCPCS: J0571

Buprenorphine oral weekly:

HCPCS: G2068, G2079

Methadone oral:

HCPCS: H0020, H0033, S0109

Methadone oral weekly:

HCPCS: G2067, G2078

Naltrexone injection:

HCPCS: J2315

Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for more information.



www.amerihealthcaritasde.com