



## Healthcare Effectiveness Data and Information Set (HEDIS®) Guidelines

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This subset of HEDIS® guidelines, including measure descriptions and compliant codes, may be updated when the new NCQA HEDIS® Technical Specifications are released around July and again with the release any updates to the HEDIS® Technical Specifications around October. Any interim updates or changes to HEDIS® Technical Specifications including, but not limited to, measures, code sets, medication lists, exclusion criteria, etc., may be obtained on the NCQA website. To access the most current and complete NCQA HEDIS® Technical Specifications, go to [www.ncqa.org](http://www.ncqa.org).

HEDIS® is a registered trademark of the National Committee of Quality Assurance (NCQA) [www.ncqa.org](http://www.ncqa.org).

## What is HEDIS®?

HEDIS® (Health Effectiveness Data and Information Set) consists of a set of performance measures utilized by more than 90 percent of all health plans to compare how well a plan performs, measuring important dimensions of care and service.

- Quality of Care
- Access to Care
- Member satisfaction with service provided by health plan and contracted doctors

HEDIS® ensures health plans are offering quality preventive care and service to all members and allows for a true comparison of the performance of health plans by consumers and employers.

## What is the Value for our Providers?

For our providers, HEDIS® quality data have proven metrics in reducing health care costs and improving efficiency. When we collaborate proactively to manage patients' care, we are able to effectively monitor their health, prevent further complications, and identify issues that may result in barriers to care, additional comorbidities, and repeated readmissions.

While partnered with Meridian, we are able to assist you in identifying non-compliant members and ensure they receive preventive screenings. Results identify your engagement and efforts to reach out and schedule preventative exams, follow up on ordered tests, and reach out to unreachable members. Rankings identify how you as provider compare among other providers, as well as with the national average.

Meridian members can use the rankings to review and compare plan scores and make informed healthcare choices within several states and all lines of business.

Network participants are contractually required to provide medical record information so that we may fulfill our state and federal regulatory and accreditation obligations. As you are aware, HIPAA regulations permit a covered entity, such as a physician practice, to disclose protected health information (PHI) to another covered entity, such as a health plan, without obtaining an enrollee's authorization or consent, for facilitating healthcare operations.

As part of your provider contract, you agree to participate in initiatives related to credentialing, peer review, utilization review, and quality assurance programs. These include, but are not limited to, medical record reviews, investigation of complaints, and outcomes studies and data collection from monitoring and evaluation of healthcare service and delivery for Meridian members.

Meridian employs a full-time internal abstraction team of HEDIS® subject matter experts with recognized success in reporting rates amongst the highest in the industry. We appreciate your time, energy, and cooperation in commitment to fulfilling these terms.

For medical records submission, providers should fax to:

Michigan: 313-202-0006

Illinois: 312-508-7213

## HEDIS® Guidelines

### Early and Periodic Screening, Diagnosis and Treatment (EPSDT)

#### Medicaid Guidelines

The Early and Periodic Screening, Diagnosis and Treatment Program (EPSDT) is a comprehensive and preventive child health service for all Medicaid recipients between the ages of newborn and 21 years. EPSDT requires a series of comprehensive newborn, well baby, well child, and well adolescent visits through age 21. This program is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, development, and specialty services.

*Procedure and Diagnosis Codes for reporting EPSDT encounters: Appendix Page 21*

### Well-Child Visits in the First 15 Months of Life

#### HEDIS® Guidelines

This measure is the percentage of members who turned 15 months old during the measurement year and who had zero to six or more well-child visits with a PCP during their first 15 months of life. The well-child visits must occur on or before the child turns 15 months old. The well-child visits must occur with a Primary Care Provider (PCP), but the PCP does not have to be the practitioner assigned to the child.

**Enrollment requirement:** Must be continuously enrolled between 31 days old and 15 months old, with no more than one gap in enrollment of up to 45 days.

*Codes to Identify Well-Child Visits: Appendix Page 21*

### Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life

#### HEDIS® Guidelines

This measure is the percentage of members three to six years of age and who had one or more well-child visits with a PCP during the measurement year. The well-child visits must occur with a Primary Care Provider (PCP), but the PCP does not have to be the practitioner assigned to the child.

**Enrollment requirement:** Must be continuously enrolled between January 1 and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days.

*Codes to Identify Well-Child Visits: Appendix Page 21*

## Adolescent Well-Care Visits

### HEDIS® Guidelines

This measure is the percentage of members 12 to 21 years of age as of December 31 of the measurement year who received at least one comprehensive well-child visit with a PCP or an OB/GYN provider between January 1 and December 31 of the measurement year. The practitioner does not have to be the practitioner assigned to the member.

**Enrollment requirement:** Must be continuously enrolled between January 1 and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days.

*Codes to Identify Adolescent Well-Care Visits: Appendix Page 21*

## Children and Adolescents' Access to Primary Care Practitioners

### HEDIS® Guidelines

This measure is the percentage of members 12 months to 19 years of age who had a visit with a PCP during the measurement year. For members seven to 19 years of age, the PCP visit can also occur in the year prior to the measurement year. The practitioner does not have to be the practitioner assigned to the member.

**Enrollment requirement:** For members 12 to 24 months and 25 months to six years of age, member must be continuously enrolled between January 1 and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days. For members seven to 11 years and 12 to 19 years of age, member must be continuously enrolled between January 1 and December 31 of the measurement year and the year prior to the measurement year, with no more than one gap in enrollment of up to 45 days during each year of continuous enrollment.

*Codes to Identify Children and Adolescents Primary Care Visits: Appendix Page 21*

## Appropriate Testing for Pharyngitis

### HEDIS® Guidelines

This measure is the percentage of episodes for members three years and older as of the Episode Date where the member was diagnosed with pharyngitis, dispensed an antibiotic, and received a group A streptococcus (strep) test for the episode.

**Enrollment requirement:** Must be continuously enrolled 30 days prior to the Episode Date through three days after the Episode Date (34 total days), with no gap in enrollment during the continuous enrollment period.

*Diagnosis Codes to Identify Pharyngitis: Appendix Page 21*

*Pharyngitis Antibiotic Medications: Appendix Page 22*

## Appropriate Treatment for Upper Respiratory Infection

### HEDIS® Guidelines

This measure is the percentage of episodes for members three months of age and older who were given a diagnosis of upper respiratory infection that did not result in an antibiotic dispensing event.

**Enrollment requirement:** Must be continuously enrollment 30 days prior to the Episode Date through three days after the Episode Date (34 total days), with no gap in enrollment during the continuous enrollment period.

*Diagnosis Codes to Identify Upper Respiratory Infections: Appendix Page 21*

*Pharyngitis Antibiotic Medications: Appendix Page 22*

## Asthma Medication Ratio

### HEDIS® Guidelines

This measure is the percentage of members five to 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.

**Enrollment requirement:** Must be continuously enrolled during the measurement year and the year prior to the measurement year with no more than one gap in enrollment of up to 45 days during each year or continuous enrollment.

*Diagnosis Codes to Identify Asthma: Appendix Page 21*

*Asthma Reliever Medications List: Appendix Page 21*

*Asthma Controller Medications List: Appendix Page 23*

## Medication Management for People with Asthma

### HEDIS® Guidelines

This measure is the percentage of members five to 64 years of age during the measurement year who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period. Two rates are reported:

- The percentage of members who remained on an asthma controller medication for at least 50 percent of their treatment period
- The percentage of members who remained on an asthma controller medication for at least 75 percent of their treatment period

**Enrollment requirement:** Must be continuously enrolled during the measurement year and the year prior to the measurement year with no more than one gap in enrollment of up to 45 days during each year of continuous enrollment.

*Diagnosis Codes to Identify Asthma: Appendix Page 21*

*Asthma Reliever Medications List: Appendix Page 21*

*Codes to Identify Exclusions from Asthma Medication Management: Appendix Page 22*

*Asthma Controller Medications List: Appendix Page 23*

*Codes to Identify Encounters with Asthma Diagnosis Result: Appendix Page 24*

## Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis

### HEDIS® Guidelines

This measure is the percentage of episodes for members three months of age and older with a diagnosis of acute bronchitis/bronchiolitis that did not result in an antibiotic dispensing event.

**Enrollment requirement:** Must be continuously enrolled 30 days prior to the Episode Date through three days after the Episode Date (34 total days), with no gaps in enrollment during the continuous enrollment period.

*Codes to Identify Acute Bronchitis: Appendix Page 47*

*Codes to Identify Exclusions from Acute Bronchitis Treatment due to Comorbidities – Members who had an encounter with any diagnosis for a comorbid condition during the 12 months prior to or on the episode date: Appendix Page 47*

*Medications to Identify Acute Bronchitis Exclusions: Appendix Page 50*

*Codes to Identify Exclusions from Acute Bronchitis Treatment due to Competing Diagnosis: Appendix Page 51*

## Pharmacotherapy Management of COPD Exacerbation

### HEDIS® Guidelines

This measure is the percentage of COPD exacerbations for members 40 years of age and older who had an acute inpatient discharge or ED visit on or between January 1 and November 30 of the measurement year and who were dispensed appropriate medications. Two rates are reported:

- Dispensed a systemic corticosteroid (or there was evidence of an active prescription) within 14 days of the event
- Dispensed a bronchodilator (or there was evidence of an active prescription) within 30 days of the event

**Enrollment requirement:** Must be continuously enrolled from the Episode Date to 30 days after the Episode Date with no gaps in enrollment during the continuous enrollment period.

*Codes to Identify Pharmacotherapy Management of COPD Exacerbation-ED resulting in an Inpatient Stay are excluded, but Inpatient discharges with a principal diagnosis of COPD, Emphysema, or Chronic Bronchitis: Appendix Page 57*

*Diagnosis Codes for Pharmacotherapy Management of COPD Exacerbation: Appendix Page 57*

*Codes to Identify Exclusions from Pharmacotherapy Management of COPD Exacerbation: Appendix Page 57*

*Systemic Corticosteroid Medications List: Appendix Page 57*

*Bronchodilator Medications List: Appendix Page 58*

# Childhood Immunization Status

## HEDIS® Guidelines

This measure is the percentage of children who turn two years of age between January 1 and December 31 of the measurement year and who receive the vaccinations listed below by their second birthday.

**Enrollment requirement:** Must be continuously enrolled during the 12 months prior to the child's second birthday, with no more than one gap in enrollment of up to 45 days.

- 1. DTaP:** At least four DTaP vaccinations with different dates of service on or before the child's second birthday. Do not count a vaccination administered prior to 42 days after birth.
- 2. IPV:** At least three polio vaccinations (IPV) with different dates of service on or before the child's second birthday. Do not count a vaccination administered prior to 42 days after birth.
- 3. MMR:** Any of the following meets criteria:
  - At least one measles, mumps, and rubella (MMR) vaccination on or between the child's first and second birthdays.
  - At least one measles and rubella vaccination on or between the child's first and second birthdays and one of the following:
    - At least one mumps vaccination on or between the child's first and second birthdays.
    - History of mumps illness any time on or before the child's second birthday.
  - Any combination of codes from the Value Sets that indicates evidence of all three antigens.
- 4. HiB:** At least three Hemophilus influenza type B (HiB) vaccinations, with different dates of service on or before the child's second birthday. Do not count a vaccination administered prior to 42 days after birth.
- 5. Hepatitis B:** Any of the following on or before the child's second birthday meet criteria:
  - At least three hepatitis B vaccinations with different dates of service.
    - One of the three vaccinations can be a newborn hepatitis B vaccination during the eight-day period that begins on the date of birth and ends seven days after the date of birth.
  - History of hepatitis illness.
- 6. VZV:** At least one chicken pox vaccination (VZV) with a date of service on or between the child's first and second birthdays, or history of

- varicella zoster (e.g. chicken pox) illness on or before the child's second birthday.
- 7. PCV:** At least four pneumococcal conjugate vaccinations (PCV), with different dates of service on or before the child's second birthday. Do not count a vaccination administered prior to 42 days after birth.
- 8. Hepatitis A:** At least one Hepatitis A vaccination with a date of service on or before the child's second birthday or history of hepatitis A illness on or before the child's second birthday.
- 9. Rotavirus:** Any of the following on different dates of service on or before the child's second birthday meet criteria. Do not count any vaccination administered prior to 42 days after birth.
  - At least two doses of the two-dose vaccine
  - At least one dose of the two-dose vaccine and two doses of the three-dose vaccine
  - At least three doses of the three-dose vaccine
- 10. Influenza:** At least two influenza vaccinations, with different dates of service on or before the child's second birthday. Do not count any vaccination administered prior to six months (180 days) after birth.

*Codes to Identify Childhood Immunizations (must be used on claim encounter): Appendix Page 24  
 Codes to Identify Exclusions for Childhood Immunizations – Exclude children who had a contraindication for a specific vaccine: Appendix Page 25  
 Combination Vaccinations for Childhood Immunization Status: Appendix Page 64*

## Immunizations for Adolescents

### HEDIS® Guidelines

This measure is the percentage of adolescents who turn 13 years of age between January 1 and December 31 of the measurement year and who receive the vaccinations as listed below by their 13<sup>th</sup> birthday.

**Enrollment requirement:** Must be continuously enrolled during the 12 months prior to the adolescent's 13<sup>th</sup> birthday, with no more than one gap in enrollment of up to 45 days.

- 1. Meningococcal Vaccine** At least one meningococcal serogroups A, C, W, Y vaccine on or between the member's 11<sup>th</sup> and 13<sup>th</sup> birthdays.
- 2. Tdap** At least one tetanus, diphtheria toxoids, and acellular pertussis vaccine (Tdap) on or between the member's 10<sup>th</sup> and 13<sup>th</sup> birthdays.
- 3. HPV** At least two human papillomavirus vaccine (HPV) vaccines with different dates of service at least 146 days apart, on or between the member's ninth and 13<sup>th</sup> birthdays, or at least three HPV vaccines with different dates of service on or between the member's ninth and 13<sup>th</sup> birthdays.

- |  |  |
|--|--|
| <b>4. Combination 1<br/>(Meningococcal,<br/>Tdap)</b>      | Adolescents who are compliant for both the meningococcal and Tdap indicators.      |
| <b>5. Combination 2<br/>(Meningococcal,<br/>Tdap, HPV)</b> | Adolescents who are compliant for all three indicators (meningococcal, Tdap, HPV). |

*Codes to Identify Adolescent Immunizations (must be used on claim/encounter): Appendix Page 27*

*Codes to Identify Exclusions for Adolescent Immunizations – Exclude adolescents who had a contraindication for a specific vaccine: Appendix Page 27*

## Lead Screening in Children

### HEDIS® Guidelines

This measure is the percentage of children who turn two years of age during the measurement year who had one or more capillary or venous lead blood test for lead poisoning by their second birthday.

**Enrollment requirement:** Must be continuously enrolled during the 12 months prior to the child's second birthday, with no more than one gap in enrollment of up to 45 days.

*Codes to Identify Lead Screening in Children (must be used on claim/encounter): Appendix Page 27*

## Follow-Up Care for Children Prescribed ADHD Medication

### HEDIS® Guidelines

This measure is the percentage of children newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication 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:

- *Initiation Phase:* The percentage of members six to 12 years of age as of the IPSD with an ambulatory prescription dispensed for ADHD medication, who had one follow-up visit with practitioner with prescribing authority during the 30-day Initiation Phase.
- *Continuation and Maintenance (C&M) Phase:* The percentage of members six to 12 years of age as of the IPSD with an ambulatory prescription dispensed for ADHD medication, who remained on the medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least two follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended.

**Enrollment Requirement:** Must be continuously enrolled for 120 days (4 months) prior to the IPSD through 30 days after the IPSD with no gaps in enrollment during the continuous enrollment period.

*ADHD Medications List: Appendix Page 42*

*Codes to Identify Exclusions for ADHD Follow-Up Treatment due to an Acute Inpatient Stay with Mental Health Diagnosis or Chemical Dependency Diagnosis: Appendix Page 56*

*Codes to Identify Initiation and Continuation Phase of ADHD Follow-Up Treatment: Appendix Page 56*

# Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

## HEDIS® Guidelines

This measure is the percentage of members three to 17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year:

- BMI percentile documentation\*
- Counseling for nutrition
- Counseling for physical activity

*\*Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than an absolute BMI value.*

**Enrollment requirement:** Must be continuously enrolled between January 1 and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days.

*Codes to Identify BMI Percentile, Nutrition Counseling, and Physical Activity Counseling: Appendix Page 23*

# Adult BMI Assessment

## HEDIS® Guidelines

This measure is the percentage of members 18 to 74 years of age who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

**Enrollment requirement:** Must be continuously enrolled between January 1 of the year prior to the measurement year through December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days during each full year of continuous enrollment.

*Codes to Identify BMI (must be used on claim/encounter): Appendix Page 23*

# Breast Cancer Screening

## HEDIS® Guidelines

This measure is the percentage of women 50 to 74 years of age who had a mammogram to screen for breast cancer.

**Enrollment requirement:** Must be continuously enrolled between October 1 two years prior to the measurement year and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days during each full calendar year of continuous enrollment.

*Codes to Identify Breast Cancer Screening (must be used on claim/encounter: Appendix Page 27  
Codes to Identify Exclusions for Breast Cancer Screening-Bilateral mastectomy any time during the member's history: Appendix Page 27*

## Cervical Cancer Screening

### HEDIS® Guidelines

This measure is the percentage of women 21 to 64 years of age who were screened for cervical cancer using either of the following criteria:

- Women ages 21 to 64 years of age who had cervical cytology performed within the last three years.
- Women ages 30 to 64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last five years.
- Women ages 30 to 64 years of age who had cervical cytology/high-risk human papillomavirus (hrHPV) testing within the last five years.

**Enrollment requirement:** Commercial: Must be continuously enrolled between January 1 and December 31 of the measurement year and two years prior to the measurement year with no more than one gap in enrollment of up to 45 days during each year of continuous enrollment. Medicaid: Must be continuously enrolled between January 1 and December 31 of the measurement year with no more than one gap in enrollment of up to 45 days.

*Codes to Identify Cervical Cytology (must be used on claim/encounter: Appendix Page 28)*

*Codes to Identify Human Papillomavirus (HPV) Test (must be used on claim/encounter: Appendix Page 28)*

*Codes to Identify Exclusions for Cervical Cancer Screening – Exclude women who had a hysterectomy with no residual cervix, cervical agenesis, or acquired absence of cervix any time during the member's history through December 31: Appendix Page 28*

## Chlamydia Screening in Women

### HEDIS® Guidelines

This measure is the percentage of women 16 to 24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

**Enrollment requirement:** Must be continuously enrolled between January 1 and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days.

*Codes to Identify Chlamydia Screening (must be used on claim/encounter: Appendix Page 29)*

*Codes to Identify Exclusions for Chlamydia Screening – Members who had a pregnancy test during the measurement year, followed within seven days by either a prescription for isotretinoin (Accutane) or an x-ray: Appendix Page 29*

*Medications to Identify Chlamydia Exclusions: Appendix Page 30*

## Comprehensive Diabetes Care

### HEDIS® Guidelines

This measure is the percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had each of the following:

- Hemoglobin A1c (HbA1c) testing
- HbA1c poor control (>9.0%)

- HbA1c control (<8.0%)
- HbA1c control (<7.0%) for a selected population\*
- Eye exam (retinal) performed
- Medical attention for nephropathy
- BP control (<140/90 mm Hg)

*\*Additional exclusion criteria are required for this indicator that will result in a different eligible population from all other indicators. This indicator is only reported for the commercial and Medicaid product lines.*

**Enrollment requirement:** Must be continuously enrolled between January 1 and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days.

*Codes to Identify HbA1c Testing: Appendix Page 30*

*Codes to Identify Eye Exams – This includes diabetics who had a retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement year or had a negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional in the year prior to the measurement year: Appendix Page 30*

*Codes to Identify Medical Attention for Nephropathy: Appendix Page 31*

*Codes to Identify Blood Pressure: Appendix Page 32*

*Codes to Identify Blood Pressure Reading during an Outpatient Visit or a Non-acute Inpatient Encounter, or Remote Monitoring event: Appendix Page 32*

*Codes to Identify Exclusions for Comprehensive Diabetes Care: Appendix Page 32*

## Prenatal and Postpartum Care

### HEDIS® Guidelines

This measure is the percentage of deliveries of live births on or between October 8 of the year prior to the measurement year and October 7 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care:

- *Timeliness of Prenatal Care:* The percentage of deliveries that received a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment in the organization.
- *Postpartum Care:* The percentage of deliveries that had a postpartum visit on or between 7 and 84 days after delivery.

**Enrollment requirement:** Must be continuously enrolled between 43 days prior to delivery through 60 days after delivery, with no gaps in enrollment during the continuous enrollment period.

*Timeliness of Prenatal Care Decision Rule 1: Either of the following during the first trimester where the practitioner type is OB/GYN or other prenatal care practitioner or PCP: Appendix Pages 34*

*Timeliness of Prenatal Decision Rule 2: Any of the following during the first trimester, where the practitioner type for the prenatal visit is an OB/GYN or other prenatal care practitioner: Appendix Page 34*

*Timeliness of Prenatal Decision Rule 3: Any of the following during the first trimester, where the practitioner type is a PCP: Appendix Page 34*

*A postpartum visit for a pelvic exam or postpartum care on or between seven and 84 days after delivery: Appendix Page 38*

## Follow-Up after Hospitalization for Mental Illness

### HEDIS® Guidelines

This measure is the percentage of discharges for members six years of age and older who were hospitalized for treatment of a selected mental illness or intentional self-harm diagnoses and who had a follow-up visit with a mental health practitioner. Two rates are reported:

- The percentage of discharges for which the member received follow-up care within seven days of discharge.
- The percentage of discharges for which the member received follow-up care within 30 days of discharge.

**Enrollment requirement:** Must have an acute inpatient discharge with a principal diagnosis of mental illness or intentional self-harm on the discharge claim on or between January 1 and December 1 of the measurement year. Must be continuously enrolled from the date of discharge through 30 days after discharge, with no gaps in enrollment during the continuous enrollment period.

*Codes to Identify Mental Health Stand Alone Visits: Appendix Page 39*

*Codes to Identify Visits with a Mental Health Practitioner for Place of Service(s), 3, 5, 7, 9, 11, 12, 13, 14, 15, 20, 22, 24, 33, 49, 50, 52, 53, 71, 72: Appendix Page 39*

*Codes to Identify Visits with a Mental Health Practitioner for Place of Service(s) 52, 53: Appendix Page 39*

*Codes to Identify a Behavioral Healthcare Facility: Appendix Page 40*

*Codes to Identify a Non-Behavioral Healthcare Facility: Appendix Page 40*

*Codes to Identify Mental Illness: Appendix Page 40*

*Code to Identify TCM 7 Day: Appendix Page 40*

*Code to Identify TCM 14 Day: Appendix Page 40*

## Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment

### HEDIS® Guidelines

This measure is the percentage of adolescent and adult members 13 years of age and older with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following:

- *Initiation of AOD Treatment:* The percentage of 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.
- *Engagement of AOD Treatment:* The percentage of members who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit.

**Enrollment requirement:** Must be continuously enrolled 60 days prior to earliest qualifying service date, or index episode start date (IESD), through 48 days after IESD (109 total days) with no gap in enrollment during the continuous enrollment period.

*Codes to Identify AOD Dependence: Appendix Page 40*

*Codes to Identify IET Stand Alone Visits: Appendix Page 41*

*Codes to Identify IET Visits for Place of Service(s) 3, 5, 7, 9, 11, 12, 13, 14, 15, 20, 22, 33, 49, 50, 52, 53, 57, 71, 72: Appendix Page 41*

*Codes to Identify IET Visits for Place of Service(s) 52, 53: Appendix Page 41*

## Antidepressant Medication Management

### HEDIS® Guidelines

This measure is 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. Two rates are reported:

- *Effective Acute Phase Treatment:* The percentage of members who remained on an antidepressant medication for at least 84 days (12 weeks).
- *Effective Continuation Phase Treatment:* The percentage of members who remained on an antidepressant medication for at least 180 days (6 months).

**Enrollment requirement:** Must be continuously enrolled 105 days prior to the earliest prescription dispensing date for an antidepressant medication during the intake period (IPSD) through 231 days after PSD with no more than one gap in enrollment of up to 45 days.

*Table AMM-C: Antidepressant Medications: Appendix Page 41*

## Diabetes Monitoring for People with Diabetes and Schizophrenia

### HEDIS® Guidelines

This measure is the percentage of members 18 to 64 years of age with schizophrenia or schizoaffective disorder and diabetes who had both an LDL-C test and an HbA1c test during the measurement year.

**Enrollment requirement:** Must be continuously enrolled between January 1 and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days.

*Codes to Identify Glucose or HbA1c Tests (must be used on claim/encounter): Appendix Page 42*

*Codes to Identify Diabetes Exclusions: Appendix Page 55*

## Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications

### HEDIS® Guidelines

This measure is the percentage of members 18 to 64 years of age with schizophrenia, schizoaffective disorder, or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year.

**Enrollment requirement:** Must be continuously enrolled between January 1 and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days.

*Codes to Identify Glucose or HbA1c Tests (must be used on claim/encounter): Appendix Page 42*

*Codes to Identify Exclusions for Diabetes from January 1 of the year prior to the measurement year through December 31 of the measurement year: Appendix Page 42*

*Medications to Identify Diabetes Exclusions: Appendix Page 43*

## Colorectal Cancer Screening

### HEDIS® Guidelines

This measure is the percentage of members 50 to 75 years of age who had appropriate screening for colorectal cancer.

**Enrollment requirement:** Must be continuously enrolled between January 1 of the year prior to the measurement year, and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days during each year of continuous enrollment.

*Codes to Identify Colonoscopy: Appendix Page 44*

*Codes to Identify FOBT: Appendix Page 44*

*Codes to Identify Flexible Sigmoidoscopy: Appendix Page 44*

*Codes to Identify CT Colonography: Appendix Page 44*

*Codes to Identify FIT- DNA test: Appendix Page 44*

*Codes to identify Exclusions for Colorectal Cancer Screening (anytime during the member's history): Appendix Page 44*

## Care for Older Adults

### HEDIS® Guidelines

This measure is the percentage of adults 66 years of age and older who had each of the following during the measurement year:

- Advance care planning
- Medication review
- Functional status assessment
- Pain assessment

**Enrollment requirement:** Must be continuously enrolled between January 1 and December 31, with no more than a one-month gap in coverage.

*Codes to Identify Advance Care Planning: Appendix Page 44*

*Codes to Identify Medication Review and Medication List: Appendix Page 44*

*Codes to Identify Functional Status Assessment: Appendix Page 44*

*Codes to Identify Pain Assessment: Appendix Page 45*

## Controlling High Blood Pressure

### HEDIS® Guidelines

This measure is the percentage of members 18 – 85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled (<140/90 mm Hg) during the measurement year.

**Enrollment requirement:** Must be continuously enrolled between January 1 and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days.

*Codes to Identify Outpatient Visits with HTN Diagnosis: Appendix Page 52*

*Codes to Identify Encounters with Diabetes Diagnosis: Appendix Page 53*

*Diabetes Medications List: Appendix Page 54*

*Codes to Identify Diabetes Exclusions: Appendix Page 55*

## Annual Dental Visit

### HEDIS® Guidelines

This measure is the percentage of members two to 20 years of age who had at least one dental visit during the measurement year. This measure applies only if dental care is a covered benefit in the organization's Medicaid contract.

**Enrollment requirement:** Must be continuously enrolled between January 1 and December 31 of the measurement year, with no more than one gap in enrollment of up to 45 days.

## Use of Imaging Studies for Low Back Pain

### HEDIS® Guidelines

This measure is the percentage of members with a primary diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of the diagnosis.

**Enrollment requirement:** Must be continuously enrolled 180 days (6 months) prior to the IESD through 28 days after the IESD, with no gap in enrollment during the continuous enrollment period.

*Codes to Identify Visits with Low Back Pain Diagnosis: Appendix Page 58*

*Diagnosis Codes for Identifying Uncomplicated Low Back Pain: Appendix Page 58*

*Codes to Identify Exclusions from Imaging Studies for Low Back Pain: Appendix Page 59*

*Corticosteroid Medications List: Appendix Page 62*

## Medication Reconciliation Post-Discharge

### HEDIS® Guidelines

This measure is the percentage of discharges between January 1 and December 1 of the measurement year for members 18 years of age and older for whom medications were reconciled the date of discharge through 30 days after discharge (31 total days).

**Enrollment requirement:** Must be continuously enrolled from the date of discharge through 30 days after discharge (31 total days), with no gap in enrollment during the continuous enrollment period.

*Codes to Identify Inpatient Stay: Appendix Page 65*

*Codes to Identify Medication Reconciliation: Appendix Page 65*

## Oral Diabetes Medication Adherence

### Pharmacy Quality Alliance (PQA) Guidelines

This measure is the percentage of members 18 years of age and older who met the Proportion of Days Covered (PDC) threshold of 80 percent during the measurement period. The rate assesses the extent to which members who filled at least two prescriptions from the following classes of diabetes medications on different dates of service during the treatment period were adherent to their prescribed drug therapy:

- Biguanides
- Sulfonylureas
- Thiazolidinedione's
- DPP-IV Inhibitors
- Incretin Mimetic
- Meglitinides
- Sodium Glucose Co-Transporter 2 (SGLT2) Inhibitors

Note: Higher rates represent better performance.

**Enrollment requirement:** Must be continuously enrolled during the Treatment Period with no gap in enrollment during the continuous enrollment period.

*\*Members with one or more prescription claims for insulin during the treatment period are excluded.*

*Biguanide Medications: Appendix Page 45*

*Sulfonylurea Medications: Appendix Page 45*

*Thiazolidinedione Medications: Appendix Page 45*

*DPP-IV Inhibitor Medications: Appendix Page 45*

*Incretin Mimetic Agents: Appendix Page 46*

*Meglitinide Medications: Appendix Page 46*

*Insulins (Exclusion Table): Appendix Page 46*

*Codes to Identify Lab Measures for Monitoring of Persistent Medications: Page 63*

*Codes to Identify Exclusion from Monitoring of Persistent Medications: Page 64*

## Hypertension Medication Adherence

### PQA Guidelines

This measure is the percentage of members 18 years of age and older who met the Proportion of Days Covered (PDC) threshold of 80 percent during the measurement period. The rate assesses the extent to which members who filled at least two prescriptions from the following classes of Renin Angiotensin System (RAS) antagonists on different dates of service during the treatment period were adherent to their prescribed drug therapy:

- Direct Renin Inhibitors
- ACE Inhibitors
- ARBs

Note: Higher rates represent better performance.

**Enrollment requirement:** Must be continuously enrolled during the Treatment Period with no gap in enrollment during the continuous enrollment period.

*\*Members with a prescription claim for sacubitril/valsartan during the treatment period are excluded.*

*RAS Antagonist Hypertension Medications: Appendix Page 46*

*Medications to Identify Exclusion: Appendix Page 47*

*ACE Inhibitor/ARB Medications List: Appendix Page 62*

*Codes to Identify Lab Measures for Monitoring of Persistent Medications: Appendix Page 63*

*Diuretic Medication List: Appendix Page 63*

*Codes to Identify Exclusion from Monitoring of Persistent Medications: Page 64*

## Statin Medication Adherence

### PQA Guidelines

This measure is the percentage of members 18 years of age and older who met the Proportion of Days Covered (PDC) threshold of 80 percent during the measurement period. The rate assesses the extent to which members who filled at least two prescriptions for any statin or statin combination product on different dates of service in the treatment period were adherent to their prescribed drug therapy.

Note: Higher rates represent better performance.

**Enrollment requirement:** Must be continuously enrolled during the Treatment Period with no gap in enrollment during the continuous enrollment period.

*Statin Cholesterol Medications: Appendix Page 47*

*Codes to Identify Lab Measures for Monitoring of Persistent Medications: Page 63*

*Codes to Identify Exclusion from Monitoring of Persistent Medications: Page 64*

## Appendix: Tables

### Procedure and Diagnosis Codes to Report EPSDT Encounters

CPT	HCPCS	ICD-10-CM Diagnosis
99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395, 99461	G0438, G0439	Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z00.5, Z00.8, Z02.0, Z02.1, Z02.2, Z02.3, Z02.4, Z02.5, Z02.6, Z02.71, Z02.82, Z76.1, Z76.2

### Codes to Identify Well-Child Visits (W15), Well-Child Visits Well-Child Visits in Third, Fourth, Fifth and Sixth Years (W34), and Adolescent Well-Care Visits (must be used on claim/encounter)

CPT	HCPCS	ICD-10-CM Diagnosis
99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395, 99461	G0438, G0439	Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z00.5, Z00.8, Z02.0, Z02.1, Z02.2, Z02.3, Z02.4, Z02.5, Z02.6, Z02.71, Z02.82, Z76.1, Z76.2

### Codes to Identify Children and Adolescents' Visits with Primary Care Providers

CPT	HCPS	ICD-10-CM	UBREV
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, 99429, 99483, 98969, 99444, 98966, 98967, 98968, 99441, 99442, 99443	G0402, G0438, G0439, G0463, T1015	Z00.00, Z00.01, Z00.121, Z00.129, Z00.3, Z00.5, Z00.8, Z02.0, Z02.1, Z02.2, Z02.3, Z02.4, Z02.5, Z02.6, Z02.71, Z02.79, Z02.81, Z02.82, Z02.83, Z02.89, Z02.9, Z76.1, Z76.2	510, 511, 512, 513, 514, 515, 516, 517, 519, 520, 521, 522, 523, 526, 527, 528, 529, 982, 983

### Diagnosis Codes to Identify Pharyngitis

CPT
87070, 87071, 87430, 87650, 87651, 87652, 87880
LOINC
11268-0, 17656-0, 17898-8, 18481-2, 31971-5, 49610-9, 5036-9, 60489-2, 626-2, 6557-3, 6558-1, 6559-9, 68954-7, 78012-2

### Diagnosis Codes to Identify Upper Respiratory Infections

ICD-10-CM
J02.0, J02.8, J02.9, J3.00, J03.01, J03.80, J03.81

### Diagnosis Codes to Identify Asthma

#### ICD-10-CM

J45.20, J45.21, J45.22, J45.30, J45.31, J45.32, J45.40, J45.41, J45.42, J45.50, J45.51, J45.52, J45.901,  
J45.902, J45.909, J45.990, J45.991, J45.998

### Asthma Reliever Medications

#### Short-Acting, Inhaled Beta-2 Agonists

- Albuterol
- Levalbuterol

## Pharyngitis Antibiotic Medications

<b>Aminopenicillins</b>		
• Amoxicillin		• Ampicillin
<b>Beta-lactamase Inhibitors</b>		
	• Amoxicillin-clavulanate	
<b>First-Generation Cephalosporin's</b>		
• Cefadroxil	• Cephalexin	• Cefazolin
<b>Folate Antagonist</b>		
	• Trimethoprim	
<b>Lincomycin Derivatives</b>		
	• Clindamycin	
<b>Macrolides</b>		
• Azithromycin • Clarithromycin	• Erythromycin • Erythromycin Ethylsuccinate	• Erythromycin Lactobionate • Erythromycin Stearate
<b>Natural Penicillins</b>		
• Penicillin G Potassium	• Penicillin V Potassium	• Penicillin G Sodium • Penicillin G benzathine
<b>Penicillinase-Resistant Penicillins</b>		
	• Dicloxacillin	
<b>Quinolones</b>		
• Ciprofloxacin • Levofloxacin		• Moxifloxacin • Ofloxacin
<b>Second-Generation Cephalosporins</b>		
• Cefaclor	• Cefprozil	• Cefuroxime
<b>Sulfonamides</b>		
	• Sulfamethoxazole-Trimethoprim	
<b>Tetracyclines</b>		
• Doxycycline	• Tetracycline	• Minocycline
<b>Third-Generation Cephalosporins</b>		
• Cefdinir • Cefixime	• Cefpodoxime • Ceftibuten	• Cefditoren • Ceftriaxone

## Codes to Identify Exclusion from Asthma Medication Management

Description	ICD-10-CM
Emphysema	J43.0, J43.1, J43.2, J43.8, J43.9
COPD	J44.0, J44.1, J44.9
Chronic Respiratory Conditions due to Fumes/Vapors	J68.4
Cystic Fibrosis	E84.0, E84.11, E84.19, E84.8, E84.9
Acute Respiratory Failure	J96.00, J96.01, J96.02, J96.20, J96.21, J96.22

### Asthma Controller Medications

<b>Antiasthmatic Combinations</b>		
• Dyphylline-guaifenesin		
<b>Antibody Inhibitors</b>		
• Omalizumab,		
<b>Inhaled Steroid Combinations</b>		
<ul style="list-style-type: none"> <li>• Budesonide-formoterol</li> <li>• Fluticasone-salmeterol</li> </ul>	<ul style="list-style-type: none"> <li>• Fluticasone-vilanterol</li> <li>• Formoterol-Mometasone</li> </ul>	
<b>Inhaled Corticosteroids</b>		
<ul style="list-style-type: none"> <li>• Beclomethasone</li> <li>• Budesonide</li> <li>• Levalbuterol</li> </ul>	<ul style="list-style-type: none"> <li>• Ciclesonide</li> <li>• Flunisolide</li> <li>• Albuterol</li> </ul>	<ul style="list-style-type: none"> <li>• Fluticasone</li> <li>• Mometasone</li> <li>• Fluticasone</li> </ul>
<b>Leukotriene Modifiers</b>		
<ul style="list-style-type: none"> <li>• Montelukast</li> </ul>	<ul style="list-style-type: none"> <li>• Zafirlukast</li> </ul>	<ul style="list-style-type: none"> <li>• Zileuton</li> </ul>
<b>Methylxanthines</b>		
• Theophylline		
<b>Anti-Interleukin-5</b>		
<ul style="list-style-type: none"> <li>• Mepolizumab</li> </ul>	<ul style="list-style-type: none"> <li>• Benralizumab</li> </ul>	<ul style="list-style-type: none"> <li>• Reslizumab</li> </ul>

### Codes to Identify BMI Percentile, Nutrition Counseling, and Physical Activity Counseling (must be used on claim/encounter)

Description	ICD-10-CM	CPT	HCPCS	LOINC
BMI Percentile	Z68.51, Z68.52, Z68.53, Z68.54			59574-4, 59575-1, 59576-9
Nutrition Counseling	Z71.3	97802, 97803, 97804	G0270, G0271, G0447, S9449, S9452, S9470	
Physical Activity Counseling	Z02.5, Z71.82		G0447, S9451	

### Codes to Identify BMI (must be used on claim/encounter)

Description	ICD-10-CM	LOINC
BMI	Z68.1, Z68.20, Z68.21, Z68.22, Z68.23, Z68.24, Z68.25, Z68.26, Z68.27, Z68.28, Z68.29, Z68.30, Z68.31, Z68.32, Z68.33, Z68.34, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45	89270-3, 39156-5
BMI Percentile	Z68.51, Z68.52, Z68.53, Z68.54	59574-4, 59575-1, 59576-9

### Codes to Identify Encounters with Result of Asthma Diagnosis

Description	CPT	HCPS	ICD-10-CM	UBREV
Outpatient Visit	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, 99429, 99455, 99456, 99483	G0402, G0438, G0439, G0463, T1015		510, 511, 512, 513, 514, 515, 516, 517, 519, 520, 521, 522, 523, 526, 527, 528, 529, 982, 983
Observation Visit	99217, 99218, 99219, 99220			
ED Visit	99281, 99282, 99283, 99284, 99285			450, 451, 452, 456, 459, 981
Acute Inpatient Stay	99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255, 99291			

### Codes to Identify Childhood Immunizations (must be used on claim/encounter)

Immunization	CPT	HCPCS	ICD-10-CM Diagnosis*	CVX
DTaP	90698, 90700, 90721, 90723			20, 50, 106, 107, 110, 120
IPV	90698, 90713, 90723			10, 89, 110, 120
MMR	90707, 90710			3, 94
Measles and Rubella	90708			4
Measles	90705		B05.0, B05.1, B05.2, B05.3, B05.4, B05.81, B05.89, B05.9	5
Mumps	90704		B26.0, B26.1, B26.2, B26.3, B26.81, B26.82, B26.83, B26.84, B26.85, B26.89, B26.9	7
Rubella	90706		B06.00, B06.01, B06.02, B06.09, B06.81, B06.82, B06.89, B06.9	6
HiB	90644, 90645, 90646, 90647, 90648, 90698, 90721, 90748			17, 46, 47, 48, 49, 50, 51, 120, 148
Hepatitis B**	90723, 90740, 90744, 90747, 90748	G0010	B16.0, B16.1, B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11, Z22.51	8, 44, 45, 51, 110
VZV	90710, 90716		B01.0, B01.11, B01.12, B01.2, B01.81, B01.89, B01.9, B02.0, B02.1,	21, 94

Immunization	CPT	HCPCS	ICD-10-CM Diagnosis*	CVX
			B02.21, B02.22, B02.23, B02.24, B02.29, B02.30, B02.31, B02.32, B02.33, B02.34, B02.39, B02.7, B02.8, B02.9	
Pneumococcal conjugate	90670	G0009		133, 152
Hepatitis A	90633		B15.0, B15.9	31, 83, 85
Rotavirus (two-dose schedule)	90681			119
Rotavirus (three-dose schedule)	90680			116, 122
Influenza	90655, 90657 90661, 90662, 90673, 90685, 90686, 90687, 90688, 90689, 90660, 90672	G0008		88, 135, 140, 141, 150, 153 155, 158, 161, 111, 149

**Codes to Identify Exclusions for Childhood Immunizations – Excludes children who had a contraindication for a specific vaccine**

Immunization	Description	ICD-10-CM Diagnosis
Any particular vaccine	Anaphylactic reaction to the vaccine or its components	T80.52XA, T80.52XD, T80.52XS
DTaP	Encephalopathy <b>with</b> a vaccine adverse-effect code	G04.32 <b>with</b> T50.A15A or T50.A15D or T50.A15S
IPV	Anaphylactic reaction to streptomycin, polymyxin B, or neomycin	NA
MMR, VZV and influenza	Immunodeficiency	D80.0, D80.1, D80.2, D80.3, D80.4, D80.5, D80.6, D80.7, D80.8, D80.9, D81.0, D81.1, D81.2, D81.4, D81.6, D81.7, D81.89, D81.9, D82.0, D82.1, D82.2, D82.3, D82.4, D82.8, D82.9, D83.0, D83.1, D83.2, D83.8, D83.9, D84.0, D84.1, D84.8, D84.9, D89.3, D89.810, D89.811, D89.812, D89.813, D89.82, D89.89, D89.9
	HIV	B20, Z21, B97.35
	Lymphoreticular cancer, multiple myeloma, or leukemia	C81.00, C81.01, C81.02, C81.03, C81.04, C81.05, C81.06, C81.07, C81.08, C81.09, C81.10, C81.11, C81.12, C81.13, C81.14, C81.15, C81.16, C81.17, C81.18, C81.19, C81.20, C81.21, C81.22, C81.23, C81.24, C81.25, C81.26, C81.27, C81.28, C81.29, C81.30, C81.31, C81.32, C81.33, C81.34, C81.35, C81.36, C81.37, C81.38, C81.39, C81.40, C81.41, C81.42, C81.43, C81.44, C81.45, C81.46, C81.47, C81.48, C81.49, C81.70, C81.71, C81.72, C81.73, C81.74, C81.75, C81.76, C81.77, C81.78, C81.79, C81.90, C81.91, C81.92, C81.93, C81.94, C81.95, C81.96, C81.97, C81.98, C81.99, C82.00, C82.01, C82.02, C82.03, C82.04, C82.05, C82.06, C82.07, C82.08, C82.09, C82.10, C82.11, C82.12, C82.13, C82.14, C82.15, C82.16, C82.17, C82.18, C82.19, C82.20,

<b>Immunization</b>	<b>Description</b>	<b>ICD-10-CM Diagnosis</b>
		C82.21, C82.22, C82.23, C82.24, C82.25, C82.26, C82.27, C82.28, C82.29, C82.30, C82.31, C82.32, C82.33, C82.34, C82.35, C82.36, C82.37, C82.38, C82.39, C82.40, C82.41, C82.42, C82.43, C82.44, C82.45, C82.46, C82.47, C82.48, C82.49, C82.50, C82.51, C82.52, C82.53, C82.54, C82.55, C82.56, C82.57, C82.58, C82.59, C82.60, C82.61, C82.62, C82.63, C82.64, C82.65, C82.66, C82.67, C82.68, C82.69, C82.80, C82.81, C82.82, C82.83, C82.84, C82.85, C82.86, C82.87, C82.88, C82.89, C82.90, C82.91, C82.92, C82.93, C82.94, C82.95, C82.96, C82.97, C82.98, C82.99, C83.00, C83.01, C83.02, C83.03, C83.04, C83.05, C83.06, C83.07, C83.08, C83.09, C83.10, C83.11, C83.12, C83.13, C83.14, C83.15, C83.16, C83.17, C83.18, C83.19, C83.30, C83.31, C83.32, C83.33, C83.34, C83.35, C83.36, C83.37, C83.38, C83.39, C83.50, C83.51, C83.52, C83.53, C83.54, C83.55, C83.56, C83.57, C83.58, C83.59, C83.70, C83.71, C83.72, C83.73, C83.74, C83.75, C83.76, C83.77, C83.78, C83.79, C83.80, C83.81, C83.82, C83.83, C83.84, C83.85, C83.86, C83.87, C83.88, C83.89, C83.90, C83.91, C83.92, C83.93, C83.94, C83.95, C83.96, C83.97, C83.98, C83.99, C84.00, C84.01, C84.02, C84.03, C84.04, C84.05, C84.06, C84.07, C84.08, C84.09, C84.10, C84.11, C84.12, C84.13, C84.14, C84.15, C84.16, C84.17, C84.18, C84.19, C84.40, C84.41, C84.42, C84.43, C84.44, C84.45, C84.46, C84.47, C84.48, C84.49, C84.60, C84.61, C84.62, C84.63, C84.64, C84.65, C84.66, C84.67, C84.68, C84.69, C84.70, C84.71, C84.72, C84.73, C84.74, C84.75, C84.76, C84.77, C84.78, C84.79, C84.90, C84.91, C84.92, C84.93, C84.94, C84.95, C84.96, C84.97, C84.98, C84.99, C84.A0, C84.A1, C84.A2, C84.A3, C84.A4, C84.A5, C84.A6, C84.A7, C84.A8, C84.A9, C84.Z0, C84.Z1, C84.Z2, C84.Z3, C84.Z4, C84.Z5, C84.Z6, C84.Z7, C84.Z8, C84.Z9, C85.10, C85.11, C85.12, C85.13, C85.14, C85.15, C85.16, C85.17, C85.18, C85.19, C85.20, C85.21, C85.22, C85.23, C85.24, C85.25, C85.26, C85.27, C85.28, C85.29, C85.80, C85.81, C85.82, C85.83, C85.84, C85.85, C85.86, C85.87, C85.88, C85.89, C85.90, C85.91, C85.92, C85.93, C85.94, C85.95, C85.96, C85.97, C85.98, C85.99, C86.0, C86.1, C86.2, C86.3, C86.4, C86.5, C86.6, C88.2, C88.3, C88.4, C88.8, C88.9, C90.00, C90.01, C90.02, C90.10, C90.11, C90.12, C90.20, C90.21, C90.22, C90.30, C90.31, C90.32, C91.00, C91.01, C91.02, C91.10, C91.11, C91.12, C91.30, C91.31, C91.32, C91.40, C91.41, C91.42, C91.50, C91.51, C91.52, C91.60, C91.61, C91.62, C91.90, C91.91, C91.92, C91.A0, C91.A1, C91.A2, C91.Z0, C91.Z1, C91.Z2, C92.00, C92.01, C92.02, C92.10, C92.11, C92.12, C92.20, C92.21, C92.22, C92.30, C92.31, C92.32, C92.40, C92.41, C92.42, C92.50, C92.51, C92.52, C92.60, C92.61, C92.62, C92.90, C92.91, C92.92, C92.A0, C92.A1, C92.A2, C92.Z0, C92.Z1, C92.Z2, C93.00, C93.01, C93.02, C93.10, C93.11, C93.12, C93.30, C93.31, C93.32, C93.90, C93.91, C93.92, C93.Z0, C93.Z1, C93.Z2, C94.00, C94.01, C94.02, C94.20, C94.21, C94.22, C94.30, C94.31, C94.32, C94.80, C94.81, C94.82, C95.00, C95.01, C95.02, C95.10, C95.11, C95.12, C95.90, C95.91,

Immunization	Description	ICD-10-CM Diagnosis
		C95.92, C96.0, C96.2, C96.20, C96.21, C96.22, C96.29, C96.4, C96.9, C96.A, C96.Z
	Anaphylactic reaction to neomycin	NA
Hepatitis B	Anaphylactic reaction to common baker's yeast	NA

**Codes to Identify Adolescent Immunizations (must be used on claim/encounter)**

Immunization	CPT	CVX	ICD-10-CM
Meningococcal	90734	108, 114, 136, 147, 167	
Tdap	90715	115	
HPV	90649, 90650, 90651	62, 118, 137, 165	

**Codes to Identify Exclusions for Adolescent Immunizations – Exclude adolescents who had a contraindication for a specific vaccine**

Immunization	Description	ICD-10-CM Diagnosis
Any particular vaccine	Anaphylactic reaction to the vaccine or its components any time on or before the member's 13 <sup>th</sup> birthday	T80.52XA, T80.52XD, T80.52XS
Any particular vaccine	Anaphylactic reaction to the vaccine or its components with a service prior to October 1, 2011	T80.52XA, T80.52XD, T80.52XS
Tdap	Encephalopathy with a vaccine adverse-effect code anytime on or before the member's 13th birthday	G04.32, T50.A15A, T50.A15D, T50.A15S

**Codes to Identify Lead Screening in Children (must be used on claim/encounter)**

CPT	LOINC
83655	5671-3, 5674-7, 10368-9, 10912-4, 14807-2, 17052-2, 25459-9, 27129-6, 32325-3, 77307-7

**Codes to Identify Breast Cancer Screening (must be used on claim/encounter)**

CPT	HCPCS	LOINC
77055, 77056, 77057, 77061, 77062, 77063, 77065, 77066, 77067	G0202, G0204, G0206	24604-1, 24605-8, 24606-6, 24610-8, 26175-0, 26176-8, 26177-6, 26287-3, 26289-9, 26291-5, 26346-7, 26347-5, 26348-3, 26349-1, 26350-9, 26351-7, 36319-2, 36625-2, 36626-0, 36627-8, 36642-7, 36962-9, 37005-6, 37006-4, 37016-3, 37017-1, 37028-8, 37029-6, 37030-4, 37037-9, 37038-7, 37052-8, 37053-6, 37539-4, 37542-8, 37543-6, 37551-9, 37552-7, 37553-5, 37554-3, 37768-9, 37769-7, 37770-5, 37771-3, 37772-1, 37773-9, 37774-7, 37775-4, 38070-9, 38071-7, 38072-5, 38090-7, 38091-5, 38807-4, 38820-7, 38854-6, 38855-3, 42415-0, 42416-8, 46335-6, 46336-4, 46337-2, 46338-0, 46339-8, 46350-5, 46351-3, 46356-2, 46380-2, 48475-8, 48492-3, 69150-1, 69251-7, 69259-0

**Codes to Identify Exclusions for Breast Cancer Screening – Bilateral mastectomy any time during the member's history**

Description	CPT	ICD-10-CM	ICD-10-PCS	Modifier
Bilateral mastectomy			OHTV0ZZ	
Unilateral mastectomy with a bilateral modifier (codes below)	19180, 19200, 19220, 19240, 19303-19307			

Description	CPT	ICD-10-CM	ICD-10-PCS	Modifier
Two unilateral mastectomies with service dates 14 days or more apart	19180, 19200, 19220, 19240, 19303-19307			
<b>Any combination of codes that indicate a mastectomy on both the left and right side on the same or different dates of service.</b> <ul style="list-style-type: none"> <li>• <b>Left Mastectomy (any of the following):</b> <ul style="list-style-type: none"> <li>○ Unilateral mastectomy with a left-side modifier (same date of service)</li> <li>○ Absence of the left breast</li> <li>○ Left unilateral mastectomy</li> </ul> </li>   <li>• <b>Right Mastectomy (any of the following):</b> <ul style="list-style-type: none"> <li>○ Unilateral mastectomy with a right-side modifier (same date of service)</li> <li>○ Absence of the right breast</li> <li>○ Right unilateral mastectomy</li> </ul> </li> </ul>	19180, 19200, 19220, 19240, 19303-19307  19180, 19200, 19220, 19240, 19303-19307			
<b>History of bilateral mastectomy</b>		Z90.13		
<b>Bilateral modifier (a bilateral procedure performed during the same operative session)</b>	50			
<b>Right-side modifier</b>			OHTT0ZZ	
<b>Left-side modifier</b>			OHTT0ZZ	

#### Codes to Identify Cervical Cytology (must be used on claim/encounter)

CPT	HCPCS	LOINC
88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88154, 88164, 88165, 88166, 88167, 88174, 88175	G0123, G0124, G0141, G0143-G0145, G0147, G0148, P3000, P3001, Q0091	10524-7, 18500-9, 19762-4, 19764-0, 19765-7, 19766-5, 19774-9, 33717-0, 47527-7, 47528-5

#### Codes to Identify Human Papillomavirus (HPV) Test (must be used on claim/encounter)

CPT	HCPCS	LOINC
87620-87622, 87624, 87625	G0476	21440-3, 30167-1, 38372-9, 59263-4, 59264-2, 59420-0, 69002-4, 71431-1, 75694-0, 77379-6, 77399-4, 77400-0, 82354-2, 82456-5, 82675-0

#### Codes to Identify Exclusions for Cervical Cancer Screening – Exclude women who had a hysterectomy with no residual cervix, cervical agenesis or acquired absence of cervix any time during the member's history through December 31 of the measurement year

Description	CPT	ICD-10-CM	ICD-10-PCS
<b>Hysterectomy</b>	51925, 56308, 57540, 57545, 57550, 57555, 57556, 58150, 58152, 58200, 58210, 58240, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58285, 58290, 58291, 58292, 58293, 58294, 58548, 58550, 58552, 58553, 58554, 58570, 58571, 58572, 58573, 58575, 58951, 58953, 58954, 58956, 59135		0UTC0ZZ, 0UTC4ZZ, 0UTC7ZZ, 0UTC8ZZ

Absence of Cervix		Q51.5, Z90.710, Z90.712	
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**Codes to Identify Chlamydia Screening (must be used on claim/encounter)**

CPT	LOINC
87110, 87270, 87320, 87490-87492, 87810	14463-4, 14464-2, 14467-5, 14474-1, 14513-6, 16600-9, 21190-4, 21191-2, 21613-5, 23838-6, 31775-0, 31777-6, 36902-5, 36903-3, 42931-6, 43304-5, 43404-3, 43405-0, 43406-8, 44806-8, 44807-6, 45068-4, 45069-2, 45075-9, 45076-7, 45084-1, 45091-6, 45095-7, 45098-1, 45100-5, 47211-8, 47212-6, 49096-1, 4993-2, 50387-0, 53925-4, 53926-2, 557-9, 560-3, 6349-5, 6354-5, 6355-2, 6356-0, 6357-8, 80360-1, 80361-9, 80362-7, 91860-7

**Codes to Identify Exclusions for Chlamydia Screening – Members who had a pregnancy test during the measurement year, followed within seven days by either a prescription for isotretinoin (Accutane) or an x-ray**

Description	CPT	LOINC
Pregnancy test	81025, 84702, 84703	2106-3, 2107-1, 2110-5, 2111-3, 2112-1, 2113-9, 2114-7, 2115-4, 2118-8, 2119-6, 19080-1, 19180-9, 20415-6, 20994-0, 21198-7, 25372-4, 25373-2, 34670-0, 45194-8, 55869-2, 55870-0, 56497-1, 80384-1, 80386-9
<b>WITH</b>		
Diagnostic Radiology	70010, 70015, 70030, 70100, 70110, 70120, 70130, 70134, 70140, 70150, 70160, 70170, 70190, 70200, 70210, 70220, 70240, 70250, 70260, 70300, 70310, 70320, 70328, 70330, 70332, 70336, 70350, 70355, 70360, 70370, 70371, 70380, 70390, 70450, 70460, 70470, 70480, 70481, 70482, 70486, 70487, 70488, 70490, 70491, 70492, 70496, 70498, 70540, 70542, 70543, 70544, 70545, 70546, 70547, 70548, 70549, 70551, 70552, 70553, 70554, 70555, 70557, 70558, 70559, 71010, 71015, 71020, 71021, 71022, 71023, 71030, 71034, 71035, 71045, 71046, 71047, 71048, 71100, 71101, 71110, 71111, 71120, 71130, 71250, 71260, 71270, 71275, 71550, 71551, 71552, 71555, 72020, 72040, 72050, 72052, 72070, 72072, 72074, 72080, 72081, 72082, 72083, 72084, 72100, 72110, 72114, 72120, 72125, 72126, 72127, 72128, 72129, 72130, 72131, 72132, 72133, 72141, 72142, 72146, 72147, 72148, 72149, 72156, 72157, 72158, 72159, 72170, 72190, 72191, 72192, 72193, 72194, 72195, 72196, 72197, 72198, 72200, 72202, 72220, 72240, 72255, 72265, 72270, 72275, 72285, 72295, 73000, 73010, 73020, 73030, 73040, 73050, 73060, 73070, 73080, 73085, 73090, 73092, 73100, 73110, 73115, 73120, 73130, 73140, 73200, 73201, 73202, 73206, 73218, 73219, 73220, 73221, 73222, 73223, 73225, 73501, 73502, 73503, 73521, 73522, 73523, 73525, 73551, 73552, 73560, 73562, 73564, 73565, 73580, 73590, 73592, 73600, 73610, 73615, 73620, 73630, 73650, 73660, 73700, 73701, 73702, 73706, 73718, 73719, 73720, 73721, 73722, 73723, 73725, 74000, 74010, 74018, 74019, 74020, 74021, 74022, 74150, 74160, 74170, 74174, 74175, 74176, 74177, 74178, 74181, 74182, 74183, 74185, 74190, 74210, 74220, 74230, 74235, 74240, 74241, 74245, 74246, 74247,	

Description	CPT	LOINC
	74249, 74250, 74251, 74260, 74261, 74262, 74263, 74270, 74280, 74283, 74290, 74300, 74301, 74328, 74329, 74330, 74340, 74355, 74360, 74363, 74400, 74410, 74415, 74420, 74425, 74430, 74440, 74445, 74450, 74455, 74470, 74485, 74710, 74712, 74713, 74740, 74742, 74775, 75557, 75559, 75561, 75563, 75565, 75571, 75572, 75573, 75574, 75600, 75605, 75625, 75630, 75635, 75658, 75705, 75710, 75716, 75726, 75731, 75733, 75736, 75741, 75743, 75746, 75756, 75774, 75801, 75803, 75805, 75807, 75809, 75810, 75820, 75822, 75825, 75827, 75831, 75833, 75840, 75842, 75860, 75870, 75872, 75880, 75885, 75887, 75889, 75891, 75893, 75894, 75898, 75901, 75902, 75952, 75953, 75954, 75956, 75957, 75958, 75959, 75970, 75984, 75989, 76000, 76001, 76010, 76080, 76098, 76100, 76101, 76102, 76120, 76125, 76140, 76376, 76377, 76380, 76390, 76391, 76496, 76497, 76498, 76499	

#### Medications to Identify Chlamydia Exclusions

Description	Prescription
Retinoid	<ul style="list-style-type: none"> <li>• Isotretinoin</li> </ul>

#### Codes to Identify HbA1c Testing

CPT	CPT Category II	LOINC
83036, 83037	3044F, 3045F, 3046F, 3051F, 3052F	4548-4, 4549-2, 17856-6

**Codes to Identify Eye Exams – This includes diabetics who had a retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement year or had a negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional in the year prior to the measurement year**

CPT	CPT Category II**	Modifier	HCPCS	ICD-10-CM	ICD-10-PCS
65091, 65093, 65101, 65103, 65105, 65110, 65112, 65114, 67028, 67030, 67031, 67036, 67039, 67040, 67041, 67042, 67043, 67101, 67105, 67107, 67108, 67110, 67113, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228, 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92225, 92226, 92227, 92228, 92230, 92235, 92240, 92250, 92260, 99203, 99204, 99205, 99213, 99214, 99215, 99242, 99243, 99244, 99245	2022F, 2023F, 2024F, 2025F, 2026F, 2033F, 3072F	50	S0620, S0621, S3000	E10.9, E11.9, E13.9	08B10ZX, 08B10ZZ, 08B13ZX, 08B13ZZ, 08B1XZX, 08B1XZZ, 08B00ZX, 08B00ZZ, 08B03ZX, 08B03ZZ, 08B0XZX, 08B0XZZ

\*Eye exams provided by eye care professionals are a proxy for dilated eye examinations because there is no administrative way to determine that a dilated exam was performed.

\*\*The organization does not need to limit CPT Category II codes or HCPCS S0625 to an optometrist or an ophthalmologist. These codes indicate an eye exam was performed by an eye care professional.

**\*\*\*CPT Category II code 3072F can only be used if the claim/encounter was during the measurement year because it indicates the member had “no evidence of retinopathy in the prior year.” Additionally, because the code definition itself indicates results were negative, an automated result is not required.**

### Codes to Identify Medical Attention for Nephropathy

CPT	HCPCS	CPT-CAT-II
90935, 90937, 90945, 90947, 90997, 90999, 99512, 50340, 50360, 50365, 50370, 50365, 50370, 50380, 81000, 81001, 81002, 81003, 81005, 82042, 82043, 82044, 84156	G0257, S9339, S2065	3066F, 4010F, 3060F, 3061F, 3062F
LOINC	ICD-10-CM	ICD-10-PCS
11218-5, 12842-1, 13705-9, 13801-6, 13986-5, 13992-3, 14956-7, 14957-5, 14958-3, 14959-1, 1753-3, 1754-1, 1755-8, 1757-4, 17819-4, 18373-1, 20454-5, 20621-9, 21059-1, 21482-5, 26801-1, 27298-9, 2887-8, 2888-6, 2889-4, 2890-2, 29946-1, 30000-4, 30001-2, 30003-8, 32209-9, 32294-1, 32551-4, 34366-5, 35663-4, 40486-3, 40662-9, 40663-7, 43605-5, 43606-3, 43607-1, 44292-1, 47558-2, 49002-9, 49023-5, 50209-6, 50561-0, 50949-7, 51190-7, 53121-0, 53525-2, 53530-2, 53531-0, 53532-8, 56553-1, 57369-1, 57735-3, 58040-0, 58448-2, 58992-9, 59159-4, 60678-0, 63474-1, 6941-9, 6942-7, 76401-9, 77253-3, 77254-1, 77940-5, 89998-9, 89999-7, 90000-1, 9318-7	E08.21, E08.22, E08.29, E09.21, E09.22, E09.29, E10.21, E10.22, E10.29, E11.21, E11.22, E11.29, E13.21, E13.22, E13.29, I12.0, I12.9, I13.0, I13.10, I13.11, I13.2, I15.0, I15.1, N00.0, N00.1, N00.2, N00.3, N00.4, N00.5, N00.6, N00.7, N00.8, N00.9, N01.0, N01.1, N01.2, N01.3, N01.4, N01.5, N01.6, N01.7, N01.8, N01.9, N02.0, N02.1, N02.2, N02.3, N02.4, N02.5, N02.6, N02.7, N02.8, N02.9, N03.0, N03.1, N03.2, N03.3, N03.4, N03.5, N03.6, N03.7, N03.8, N03.9, N04.0, N04.1, N04.2, N04.3, N04.4, N04.5, N04.6, N04.7, N04.8, N04.9, N05.0, N05.1, N05.2, N05.3, N05.4, N05.5, N05.6, N05.7, N05.8, N05.9, N06.0, N06.1, N06.2, N06.3, N06.4, N06.5, N06.6, N06.7, N06.8, N06.9, N07.0, N07.1, N07.2, N07.3, N07.4, N07.5, N07.6, N07.7, N07.8, N07.9, N08, N14.0, N14.1, N14.2, N14.3, N14.4, N17.0, N17.1, N17.2, N17.8, N17.9, N18.1, N18.2, N18.3, N18.4, N18.5, N18.6, N18.9, N19, N25.0, N25.1, N25.81, N25.89, N25.9, N26.1, N26.2, N26.9, Q60.0, Q60.1, Q60.2, Q60.3, Q60.4, Q60.5, Q60.6, Q61.00, Q61.01, Q61.02, Q61.11, Q61.19, Q61.2, Q61.3, Q61.4, Q61.5, Q61.8, Q61.9, R80.0, R80.1, R80.2, R80.3, R80.8, R80.9, Z99.2	3E1M39Z, 5A1D00Z, 5A1D60Z, 5A1D70Z, 5A1D80Z, 5A1D90Z, 0TY00Z0, 0TY00Z1, 0TY00Z2, 0TY10Z0, 0TY10Z1, 0TY10Z2, 0TB00ZX, 0TB00ZZ, 0TB03ZX, 0TB03ZZ, 0TB04ZX, 0TB04ZZ, 0TB07ZX, 0TB07ZZ, 0TB08ZX, 0TB08ZZ, 0TB10ZX, 0TB10ZZ, 0TB13ZX, 0TB13ZZ, 0TB14ZX, 0TB14ZZ, 0TB17ZX, 0TB17ZZ, 0TB18ZX, 0TB18ZZ

### Codes to Identify Blood Pressure

Description	Numerator Compliance	CPT-CAT-II
<b>Systolic Less Than 140</b>	Systolic compliant	3074F, 3075F
<b>Systolic Greater Than/Equal To 140</b>	Systolic not compliant	3077F
<b>Diastolic Less Than 80</b>	Diastolic compliant	3078F
<b>Diastolic 80-89</b>	Diastolic compliant	3079F
<b>Diastolic Greater Than/Equal to 90</b>	Diastolic not compliant	3080F

### Codes to Identify Blood Pressure Reading during an Outpatient Visit or a Non-acute Inpatient Encounter, or Remote Monitoring event

Description	CPT	HCPCS	UBREV
<b>Outpatient Visit</b>	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, 99429, 99455, 99456, 99483	G0402, G0438, G0439, G0463, T1015	0510, 0511, 0512, 0513, 0514, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0982, 0983
<b>Non-acute Inpatient Encounter</b>	99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337		0118, 0128, 0138, 0148, 0158, 0190, 0191, 0192, 0193, 0194, 0199, 0524, 0525, 0550, 0551, 0552, 0559, 0660, 0661, 0662, 0663, 0669, 1000, 1001, 1003, 1004, 1005
<b>Remote Monitoring Event</b>	93784, 93788, 93790, 99091, 99453, 99454, 99457		

### Codes to Identify Exclusions for Comprehensive Diabetes Care

Description	ICD-10-CM
<b>Gestational or Steroid-induced Diabetes</b>	E10.10, E10.11, E10.21, E10.22, E10.29, E10.311, E10.319, E10.321, E10.3211, E10.3212, E10.3213, E10.3219, E10.329, E10.3291, E10.3292, E10.3293, E10.3299, E10.331, E10.3311, E10.3312, E10.3313, E10.3319, E10.339, E10.3391, E10.3392, E10.3393, E10.3399, E10.341, E10.3411, E10.3412, E10.3413, E10.3419, E10.349, E10.3491, E10.3492, E10.3493, E10.3499, E10.351, E10.3511, E10.3512, E10.3513, E10.3519, E10.3521, E10.3522, E10.3523, E10.3529, E10.3531, E10.3532, E10.3533, E10.3539, E10.3541, E10.3542, E10.3543, E10.3549, E10.3551, E10.3552, E10.3553, E10.3559, E10.359, E10.3591, E10.3592, E10.3593, E10.3599, E10.36, E10.37X1, E10.37X2, E10.37X3, E10.37X9, E10.39, E10.40, E10.41, E10.42, E10.43, E10.44, E10.49, E10.51, E10.52, E10.59, E10.610, E10.618, E10.620, E10.621, E10.622, E10.628, E10.630, E10.638, E10.641, E10.649, E10.65, E10.69, E10.8, E10.9, E11.00, E11.01, E11.10, E11.11, E11.21, E11.22, E11.29, E11.311, E11.319, E11.321, E11.3211, E11.3212, E11.3213, E11.3219, E11.329, E11.3291, E11.3292, E11.3293, E11.3299, E11.331, E11.3311, E11.3312, E11.3313, E11.3319, E11.339, E11.3391, E11.3392, E11.3393, E11.3399, E11.341, E11.3411, E11.3412, E11.3413, E11.3419, E11.349, E11.3491, E11.3492, E11.3493, E11.3499, E11.351, E11.3511, E11.3512, E11.3513, E11.3519, E11.3521, E11.3522, E11.3523, E11.3529, E11.3531, E11.3532, E11.3533, E11.3539, E11.3541, E11.3542, E11.3543, E11.3549, E11.3551, E11.3552,

E11.3553, E11.3559, E11.359, E11.3591, E11.3592, E11.3593, E11.3599, E11.36, E11.37X1, E11.37X2, E11.37X3, E11.37X9, E11.39, E11.40, E11.41, E11.42, E11.43, E11.44, E11.49, E11.51, E11.52, E11.59, E11.610, E11.618, E11.620, E11.621, E11.622, E11.628, E11.630, E11.638, E11.641, E11.649, E11.65, E11.69, E11.8, E11.9, E13.00, E13.01, E13.10, E13.11, E13.21, E13.22, E13.29, E13.311, E13.319, E13.321, E13.3211, E13.3212, E13.3213, E13.3219, E13.329, E13.3291, E13.3292, E13.3293, E13.3299, E13.331, E13.3311, E13.3312, E13.3313, E13.3319, E13.339, E13.3391, E13.3392, E13.3393, E13.3399, E13.341, E13.3411, E13.3412, E13.3413, E13.3419, E13.349, E13.3491, E13.3492, E13.3493, E13.3499, E13.351, E13.3511, E13.3512, E13.3513, E13.3519, E13.3521, E13.3522, E13.3523, E13.3529, E13.3531, E13.3532, E13.3533, E13.3539, E13.3541, E13.3542, E13.3543, E13.3549, E13.3551, E13.3552, E13.3553, E13.3559, E13.359, E13.3591, E13.3592, E13.3593, E13.3599, E13.36, E13.37X1, E13.37X2, E13.37X3, E13.37X9, E13.39, E13.40, E13.41, E13.42, E13.43, E13.44, E13.49, E13.51, E13.52, E13.59, E13.610, E13.618, E13.620, E13.621, E13.622, E13.628, E13.630, E13.638, E13.641, E13.649, E13.65, E13.69, E13.8, E13.9, O24.011, O24.012, O24.013, O24.019, O24.02, O24.03, O24.111, O24.112, O24.113, O24.119, O24.12, O24.13, O24.311, O24.312, O24.313, O24.319, O24.32, O24.33, O24.811, O24.812, O24.813, O24.819, O24.82, O24.83, E08.00, E08.01, E08.10, E08.11, E08.21, E08.22, E08.29, E08.311, E08.319, E08.321, E08.3211, E08.3212, E08.3213, E08.3219, E08.329, E08.3291, E08.3292, E08.3293, E08.3299, E08.331, E08.3311, E08.3312, E08.3313, E08.3319, E08.339, E08.3391, E08.3392, E08.3393, E08.3399, E08.341, E08.3411, E08.3412, E08.3413, E08.3419, E08.349, E08.3491, E08.3492, E08.3493, E08.3499, E08.351, E08.3511, E08.3512, E08.3513, E08.3519, E08.3521, E08.3522, E08.3523, E08.3529, E08.3531, E08.3532, E08.3533, E08.3539, E08.3541, E08.3542, E08.3543, E08.3549, E08.3551, E08.3552, E08.3553, E08.3559, E08.359, E08.3591, E08.3592, E08.3593, E08.3599, E08.36, E08.37X1, E08.37X2, E08.37X3, E08.37X9, E08.39, E08.40, E08.41, E08.42, E08.43, E08.44, E08.49, E08.51, E08.52, E08.59, E08.610, E08.618, E08.620, E08.621, E08.622, E08.628, E08.630, E08.638, E08.641, E08.649, E08.65, E08.69, E08.8, E08.9, E09.00, E09.01, E09.10, E09.11, E09.21, E09.22, E09.29, E09.311, E09.319, E09.321, E09.3211, E09.3212, E09.3213, E09.3219, E09.329, E09.3291, E09.3292, E09.3293, E09.3299, E09.331, E09.3311, E09.3312, E09.3313, E09.3319, E09.339, E09.3391, E09.3392, E09.3393, E09.3399, E09.341, E09.3411, E09.3412, E09.3413, E09.3419, E09.349, E09.3491, E09.3492, E09.3493, E09.3499, E09.351, E09.3511, E09.3512, E09.3513, E09.3519, E09.3521, E09.3522, E09.3523, E09.3529, E09.3531, E09.3532, E09.3533, E09.3539, E09.3541, E09.3542, E09.3543, E09.3549, E09.3551, E09.3552, E09.3553, E09.3559, E09.359, E09.3591, E09.3592, E09.3593, E09.3599, E09.36, E09.37X1, E09.37X2, E09.37X3, E09.37X9, E09.39, E09.40, E09.41, E09.42, E09.43, E09.44, E09.49, E09.51, E09.52, E09.59, E09.610, E09.618, E09.620, E09.621, E09.622, E09.628, E09.630, E09.638, E09.641, E09.649, E09.65, E09.69, E09.8, E09.9, O24.410, O24.414, O24.415, O24.419, O24.420, O24.424, O24.425, O24.429, O24.430, O24.434, O24.435, O24.439, O24.911, O24.912, O24.913, O24.919, O24.92, O24.93

## Prenatal and Postpartum Care

Decision Rule 1: Either of the following during the first trimester where the practitioner type is OB/GYN or other prenatal care practitioner or PCP:

- A bundled service (Table 1) where the organization can identify the date when prenatal care was initiated
- A visit for prenatal care (Table 2)

Decision Rule 2: Any of the following during the first trimester, where the practitioner type for the prenatal visit is an OB/GYN or other prenatal care practitioner:

A prenatal visit (Table 3) and one of the following options:

- Ultrasound of the Pregnant Uterus (Table 4)
- Pregnancy-Related Diagnosis (Table 5)

Decision Rule 3: Any of the following during the first trimester, where the practitioner type is a PCP:

A prenatal visit (Table 3) and one of the following options:

- Ultrasound of the Pregnant Uterus (Table 4)
- Pregnancy-Related diagnosis (Table 5)

**Table 1: Prenatal Bundled Services**

Description	CPT	HCPCS
Prenatal Bundled Services	59400, 59425, 59426, 59510, 59610, 59618	H1005

**Table 2: Stand Alone Prenatal Visits**

Description	CPT	CPT-CAT-II	HCPS
Stand Alone Prenatal Visits	99500,	0500F, 0501F, 0502F	H1000, H1001, H1002, H1003, H1004

**Table 3: Prenatal Visits**

Description	CPT	HCPCS
Prenatal Visits	99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99483	G0463, T1015

**Table 4: Ultrasound of the Pregnant Uterus**

Description	CPT	ICD10PCS	ICD9PCS
Ultrasound of the Pregnant Uterus	76801, 76805, 76811, 76813, 76815, 76816, 76817, 76818, 76819, 76820, 76821, 76825, 76826, 76827, 76828,	NA	88.78

**Table 5: Pregnancy Diagnosis Codes**

ICD-10-CM

ICD-10-CM

O31.13X9, O31.20X0, O31.20X1, O31.20X2, O31.20X3, O31.20X4, O31.20X5, O31.20X9,  
O31.21X0, O31.21X1, O31.21X2, O31.21X3, O31.21X4, O31.21X5, O31.21X9, O31.22X0,  
O31.22X1, O31.22X2, O31.22X3, O31.22X4, O31.22X5, O31.22X9, O31.23X0, O31.23X1,  
O31.23X2, O31.23X3, O31.23X4, O31.23X5, O31.23X9, O31.30X0, O31.30X1, O31.30X2,  
O31.30X3, O31.30X4, O31.30X5, O31.30X9, O31.31X0, O31.31X1, O31.31X2, O31.31X3,  
O31.31X4, O31.31X5, O31.31X9, O31.32X0, O31.32X1, O31.32X2, O31.32X3, O31.32X4,  
O31.32X5, O31.32X9, O31.33X0, O31.33X1, O31.33X2, O31.33X3, O31.33X4, O31.33X5,  
O31.33X9, O31.8X10, O31.8X11, O31.8X12, O31.8X13, O31.8X14, O31.8X15, O31.8X19,  
O31.8X20, O31.8X21, O31.8X22, O31.8X23, O31.8X24, O31.8X25, O31.8X29, O31.8X30,  
O31.8X31, O31.8X32, O31.8X33, O31.8X34, O31.8X35, O31.8X39, O31.8X90, O31.8X91,  
O31.8X92, O31.8X93, O31.8X94, O31.8X95, O31.8X99, O32.0XX0, O32.0XX1, O32.0XX2,  
O32.0XX3, O32.0XX4, O32.0XX5, O32.0XX9, O32.1XX0, O32.1XX1, O32.1XX2, O32.1XX3,  
O32.1XX4, O32.1XX5, O32.1XX9, O32.2XX0, O32.2XX1, O32.2XX2, O32.2XX3, O32.2XX4,  
O32.2XX5, O32.2XX9, O32.3XX0, O32.3XX1, O32.3XX2, O32.3XX3, O32.3XX4, O32.3XX5,  
O32.3XX9, O32.4XX0, O32.4XX1, O32.4XX2, O32.4XX3, O32.4XX4, O32.4XX5, O32.4XX9,  
O32.6XX0, O32.6XX1, O32.6XX2, O32.6XX3, O32.6XX4, O32.6XX5, O32.6XX9, O32.8XX0,  
O32.8XX1, O32.8XX2, O32.8XX3, O32.8XX4, O32.8XX5, O32.8XX9, O32.9XX0, O32.9XX1,  
O32.9XX2, O32.9XX3, O32.9XX4, O32.9XX5, O32.9XX9, O33.0, O33.1, O33.2, O33.3XX0,  
O33.3XX1, O33.3XX2, O33.3XX3, O33.3XX4, O33.3XX5, O33.3XX9, O33.4XX0, O33.4XX1,  
O33.4XX2, O33.4XX3, O33.4XX4, O33.4XX5, O33.4XX9, O33.5XX0, O33.5XX1, O33.5XX2,  
O33.5XX3, O33.5XX4, O33.5XX5, O33.5XX9, O33.6XX0, O33.6XX1, O33.6XX2, O33.6XX3,  
O33.6XX4, O33.6XX5, O33.6XX9, O33.7, O33.7XX0, O33.7XX1, O33.7XX2, O33.7XX3,  
O33.7XX4, O33.7XX5, O33.7XX9, O33.8, O33.9, O34.00, O34.01, O34.02, O34.03, O34.10,  
O34.11, O34.12, O34.13, O34.21, O34.211, O34.212, O34.219, O34.29, O34.30, O34.31,  
O34.32, O34.33, O34.40, O34.41, O34.42, O34.43, O34.511, O34.512, O34.513, O34.519,  
O34.521, O34.522, O34.523, O34.529, O34.531, O34.532, O34.533, O34.539, O34.591,  
O34.592, O34.593, O34.599, O34.60, O34.61, O34.62, O34.63, O34.70, O34.71, O34.72,  
O34.73, O34.80, O34.81, O34.82, O34.83, O34.90, O34.91, O34.92, O34.93, O35.0XX0,  
O35.0XX1, O35.0XX2, O35.0XX3, O35.0XX4, O35.0XX5, O35.0XX9, O35.1XX0, O35.1XX1,  
O35.1XX2, O35.1XX3, O35.1XX4, O35.1XX5, O35.1XX9, O35.2XX0, O35.2XX1, O35.2XX2,  
O35.2XX3, O35.2XX4, O35.2XX5, O35.2XX9, O35.3XX0, O35.3XX1, O35.3XX2, O35.3XX3,  
O35.3XX4, O35.3XX5, O35.3XX9, O35.4XX0, O35.4XX1, O35.4XX2, O35.4XX3, O35.4XX4,  
O35.4XX5, O35.4XX9, O35.5XX0, O35.5XX1, O35.5XX2, O35.5XX3, O35.5XX4, O35.5XX5,  
O35.5XX9, O35.6XX0, O35.6XX1, O35.6XX2, O35.6XX3, O35.6XX4, O35.6XX5, O35.6XX9,  
O35.7XX0, O35.7XX1, O35.7XX2, O35.7XX3, O35.7XX4, O35.7XX5, O35.7XX9, O35.8XX0,  
O35.8XX1, O35.8XX2, O35.8XX3, O35.8XX4, O35.8XX5, O35.8XX9, O35.9XX0, O35.9XX1,  
O35.9XX2, O35.9XX3, O35.9XX4, O35.9XX5, O35.9XX9, O36.0110, O36.0111, O36.0112,  
O36.0113, O36.0114, O36.0115, O36.0119, O36.0120, O36.0121, O36.0122, O36.0123,  
O36.0124, O36.0125, O36.0129, O36.0130, O36.0131, O36.0132, O36.0133, O36.0134,  
O36.0135, O36.0139, O36.0190, O36.0191, O36.0192, O36.0193, O36.0194, O36.0195,  
O36.0199, O36.0910, O36.0911, O36.0912, O36.0913, O36.0914, O36.0915, O36.0919,  
O36.0920, O36.0921, O36.0922, O36.0923, O36.0924, O36.0925, O36.0929, O36.0930,  
O36.0931, O36.0932, O36.0933, O36.0934, O36.0935, O36.0939, O36.0990, O36.0991,  
O36.0992, O36.0993, O36.0994, O36.0995, O36.0999, O36.1110, O36.1111, O36.1112,  
O36.1113, O36.1114, O36.1115, O36.1119, O36.1120, O36.1121, O36.1122, O36.1123,  
O36.1124, O36.1125, O36.1129, O36.1130, O36.1131, O36.1132, O36.1133, O36.1134,  
O36.1135, O36.1139, O36.1190, O36.1191, O36.1192, O36.1193, O36.1194, O36.1195,  
O36.1199, O36.1910, O36.1911, O36.1912, O36.1913, O36.1914, O36.1915, O36.1919,  
O36.1920, O36.1921, O36.1922, O36.1923, O36.1924, O36.1925, O36.1929, O36.1930,  
O36.1931, O36.1932, O36.1933, O36.1934, O36.1935, O36.1939, O36.1990, O36.1991,  
O36.1992, O36.1993, O36.1994, O36.1995, O36.1999, O36.20X0, O36.20X1, O36.20X2,  
O36.20X3, O36.20X4, O36.20X5, O36.20X9, O36.21X0, O36.21X1, O36.21X2, O36.21X3,  
O36.21X4, O36.21X5, O36.21X9, O36.22X0, O36.22X1, O36.22X2, O36.22X3, O36.22X4,  
O36.22X5, O36.22X9, O36.23X0, O36.23X1, O36.23X2, O36.23X3, O36.23X4, O36.23X5,

ICD-10-CM

**ICD-10-CM**

<b>ICD-10-CM</b>						
	O41.90X4, O41.90X5, O41.90X9, O41.91X0, O41.91X1, O41.91X2, O41.91X3, O41.91X4, O41.91X5, O41.91X9, O41.92X0, O41.92X1, O41.92X2, O41.92X3, O41.92X4, O41.92X5, O41.92X9, O41.93X0, O41.93X1, O41.93X2, O41.93X3, O41.93X4, O41.93X5, O41.93X9, O42.00, O42.011, O42.012, O42.013, O42.019, O42.02, O42.10, O42.111, O42.112, O42.113, O42.119, O42.12, O42.90, O42.911, O42.912, O42.913, O42.919, O42.92, O43.011, O43.012, O43.013, O43.019, O43.021, O43.022, O43.023, O43.029, O43.101, O43.102, O43.103, O43.109, O43.111, O43.112, O43.113, O43.119, O43.121, O43.122, O43.123, O43.129, O43.191, O43.192, O43.193, O43.199, O43.211, O43.212, O43.213, O43.219, O43.221, O43.222, O43.223, O43.229, O43.231, O43.232, O43.233, O43.239, O43.811, O43.812, O43.813, O43.819, O43.891, O43.892, O43.893, O43.899, O43.90, O43.91, O43.92, O43.93, O44.00, O44.01, O44.02, O44.03, O44.10, O44.11, O44.12, O44.13, O44.20, O44.21, O44.22, O44.23, O44.30, O44.31, O44.32, O44.33, O44.40, O44.41, O44.42, O44.43, O44.50, O44.51, O44.52, O44.53, O45.001, O45.002, O45.003, O45.009, O45.011, O45.012, O45.013, O45.019, O45.021, O45.022, O45.023, O45.029, O45.091, O45.092, O45.093, O45.099, O45.8X1, O45.8X2, O45.8X3, O45.8X9, O45.90, O45.91, O45.92, O45.93, O46.001, O46.002, O46.003, O46.009, O46.011, O46.012, O46.013, O46.019, O46.021, O46.022, O46.023, O46.029, O46.091, O46.092, O46.093, O46.099, O46.8X1, O46.8X2, O46.8X3, O46.8X9, O46.90, O46.91, O46.92, O46.93, O47.00, O47.02, O47.03, O47.1, O47.9, O48.0, O48.1, O60.00, O60.02, O60.03, O71.00, O71.02, O71.03, O71.1, O71.2, O71.3, O71.4, O71.5, O71.6, O71.7, O71.81, O71.82, O71.89, O71.9, O88.011, O88.012, O88.013, O88.019, O88.111, O88.112, O88.113, O88.119, O88.211, O88.212, O88.213, O88.219, O88.311, O88.312, O88.313, O88.319, O88.811, O88.812, O88.813, O88.819, O91.011, O91.012, O91.013, O91.019, O91.03, O91.111, O91.112, O91.113, O91.119, O91.13, O91.211, O91.212, O91.213, O91.219, O91.23, O92.011, O92.012, O92.013, O92.019, O92.03, O92.111, O92.112, O92.113, O92.119, O92.13, O92.3, O92.4, O92.5, O92.6, O92.70, O92.79, O98.011, O98.012, O98.013, O98.019, O98.111, O98.112, O98.113, O98.119, O98.211, O98.212, O98.213, O98.219, O98.311, O98.312, O98.313, O98.319, O98.411, O98.412, O98.413, O98.419, O98.511, O98.512, O98.513, O98.519, O98.611, O98.612, O98.613, O98.619, O98.711, O98.712, O98.713, O98.719, O98.811, O98.812, O98.813, O98.819, O98.911, O98.912, O98.913, O98.919, O99.011, O99.012, O99.013, O99.019, O99.111, O99.112, O99.113, O99.119, O99.210, O99.211, O99.212, O99.213, O99.280, O99.281, O99.282, O99.283, O99.310, O99.311, O99.312, O99.313, O99.320, O99.321, O99.322, O99.323, O99.330, O99.331, O99.332, O99.333, O99.340, O99.341, O99.342, O99.343, O99.350, O99.351, O99.352, O99.353, O99.411, O99.412, O99.413, O99.419, O99.511, O99.512, O99.513, O99.519, O99.611, O99.612, O99.613, O99.619, O99.711, O99.712, O99.713, O99.719, O99.810, O99.820, O99.830, O99.840, O99.841, O99.842, O99.843, O9A.111, O9A.112, O9A.113, O9A.119, O9A.211, O9A.212, O9A.213, O9A.219, O9A.311, O9A.312, O9A.313, O9A.319, O9A.411, O9A.412, O9A.413, O9A.419, O9A.511, O9A.512, O9A.513, O9A.519, Z03.71, Z03.72, Z03.73, Z03.74, Z03.75, Z03.79, Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z36, Z36.0, Z36.1, Z36.2, Z36.3, Z36.4, Z36.5, Z36.81, Z36.82, Z36.83, Z36.84, Z36.85, Z36.86, Z36.87, Z36.88, Z36.89, Z36.8A, Z36.9					

**A postpartum visit for a pelvic exam or postpartum care on or between 7 and 84 days after delivery. Any of the following meets the criteria:**

Description	CPT	Category II	HCPCS	ICD-10-CM	UBREV	LOINC
<b>Postpartum Visit</b>	57170, 58300, 59430, 99501	0503F	G0101	Z01.411, Z01.419, Z01.42, Z30.430,		

				Z39.1, Z39.2		
<b>Cervical Cytology</b>	88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88154, 88164, 88165, 88166, 88167, 88174, 88175		G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091			10524-7, 18500-9, 19762-4, 19764-0, 19765-7, 19766-5, 19774-9, 33717-0, 47527-7, 47528-5
Description	CPT	CPT Category II	HCPCS	ICD-10- CM	UBREV	LOINC
<b>Postpartum Bundled Services*</b>	59400, 59410, 59515, 59610, 59614, 59618, 59622, 59510					

\*These codes can only be used if the claim form indicates when postpartum care was rendered.

#### Codes to Identify Mental Health Stand Alone Visits

CPT	HCPCS	UBREV
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	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, M0064, S0201, S9480, S9484, S9485, T1006, T1012, T1015	510, 513, 515, 516, 517, 519, 520, 521, 522, 523, 526, 527, 528, 529, 900, 902, 903, 904, 911, 914, 915, 916, 917, 919, 982, 983

#### Codes to Identify Visits with a Mental Health Practitioner for Place of Service(s) 3, 5, 7, 9, 11, 12, 13, 14, 15, 20, 22, 24, 33, 49, 50, 52, 53, 71, 72

CPT	ICD-10-PCS
90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90870, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255	GZB0ZZZ, GZB1ZZZ, GZB2ZZZ, GZB3ZZZ, GZB4ZZZ

#### Codes to Identify Visits with a Mental Health Practitioner for Place of Service(s) 52, 53

CPT
99217, 99218, 99219, 99220, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255

## **Codes to Identify a Behavioral Healthcare Facility**

**UBREV**

513, 900, 901, 902, 903, 904, 905, 907, 911, 912, 913, 914, 915, 916, 917, 919

## **Codes to Identify a Non-Behavioral Healthcare Facility**

**UBREV**

510, 515, 516, 517, 519, 520, 521, 522, 523, 526, 527, 528, 529, 982, 983

## **Codes to Identify Mental Illness**

**ICD-10-CM**

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

## **Code to Identify TCM 7 Day**

**CPT**

99496

## **Code to Identify TCM 14 Day**

**CPT**

99495

## **Codes to Identify AOD Dependence**

**ICD-10-CM**

F10.10, F10.120, F10.121, F10.129, 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, F11.14, 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, F12.150, 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, F13.14, 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, F14.14, 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, F15.14, 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, F19.14, F19.150, F19.151, F19.159, F19.16, F19.17, F19.180, F19.181, F19.182, F19.188,

**ICD-10-CM**

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
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**Codes to Identify IET Stand Alone Visits**

CPT	HCPCS	UBREV
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	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, M0064, S0201, S9480, S9484, S9485, T1006, T1012, T1015	510, 513, 515, 516, 517, 519, 520, 521, 522, 523, 526, 527, 528, 529, 900, 902, 903, 904, 905, 906, 907, 911, 912, 913, 914, 915, 916, 917, 919, 944, 945, 982, 983

**Codes to Identify IET Visits for Place of Service(s) 2, 3, 5, 7, 9, 11, 12, 13, 14, 15, 20, 22, 33, 49, 50, 52, 53, 57, 71, 72**

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

**Codes to Identify IET Visits for Place of Service(s) 52, 53**

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

**Table AMM-C: Antidepressant Medications**

Description	Prescription		
<b>Miscellaneous antidepressants</b>	• Bupropion	• Vilazodone	• Vortioxetine
<b>Monoamine oxidase inhibitors</b>	• Isocarboxazid • Phenelzine	• Selegiline • Tranylcypromine	
<b>Phenylpiperazine antidepressants</b>	• Nefazodone	• Trazodone	
<b>Psychotherapeutic combinations</b>	• Amitriptyline-chlordiazepoxide • Amitriptyline-perphenazine		• Fluoxetine-olanzapine
<b>SNRI antidepressants</b>	• Desvenlafaxine • Duloxetine	• Levomilnacipran • Venlafaxine	
<b>SSRI antidepressants</b>	• Citalopram • Escitalopram	• Fluoxetine • Fluvoxamine	• Paroxetine • Sertraline
<b>Tetracyclic antidepressants</b>	• Maprotiline	• Mirtazapine	
<b>Tricyclic antidepressants</b>	• Amitriptyline • Amoxapine • Clomipramine	• Desipramine • Doxepin (>6 mg) • Imipramine	• Nortriptyline • Protriptyline • Trimipramine

ADHD Medications		
CNS Stimulants		
• Amphetamine-Dextroamphetamine • Dexmethylphenidate	• Dextroamphetamine • Lisdexamfetamine	• Methylphenidate • Methamphetamine
Alpha-2 Receptor Agonists		
• Clonidine	• Guanfacine	
Miscellaneous ADHD Medications		
	• Atomoxetine	

#### Codes to Identify Glucose or HbA1c Tests (must be used on claim/encounter)

Description	CPT	LOINC
Glucose Tests	<b>80047,80048,80050,80053,80069,82947,82950,82951</b>	10450-5,1492-8,1494-8,1494-4,1496-9,1499-3,1501-6,1504-0,1507-3,1514-9,1518-0,1530-5,1533-9,1557-8,1558-6,1765-7,20436-2,20437-0,20438-8,20440-4,26554-6,41024-1,49134-0,6749-6,9375-7
HbA1c Testing	83036, 83037	17856-6, 4548-4, 4549-2

#### Codes to Identify Exclusions for Diabetes from January 1 of the year prior to the measurement year through December 31 of the measurement year

Description	ICD-10-CM
Diabetes	E10.10, E10.11, E10.21, E10.22, E10.29, E10.311, E10.319, E10.321, E10.3211, E10.3212, E10.3213, E10.3219, E10.329, E10.3291, E10.3292, E10.3293, E10.3299, E10.331, E10.3311, E10.3312, E10.3313, E10.3319, E10.339, E10.3391, E10.3392, E10.3393, E10.3399, E10.341, E10.3412, E10.3413, E10.3419, E10.349, E10.3491, E10.3492, E10.3493, E10.3499, E10.351, E10.3511, E10.3512, E10.3513, E10.3519, E10.3521, E10.3522, E10.3523, E10.3529, E10.3531, E10.3532, E10.3533, E10.3539, E10.3541, E10.3542, E10.3543, E10.3549, E10.3551, E10.3552, E10.3553, E10.3559, E10.359, E10.3591, E10.3592, E10.3593, E10.3599, E10.36, E10.37X1, E10.37X2, E10.37X3, E10.37X9, E10.39, E10.40, E10.41, E10.42, E10.43, E10.44, E10.49, E10.51, E10.52, E10.59, E10.610, E10.618, E10.620, E10.621, E10.622, E10.628, E10.630, E10.638, E10.641, E10.649, E10.65, E10.69, E10.8, E10.9, E11.00, E11.01, E11.10, E11.11, E11.21, E11.22, E11.29, E11.311, E11.319, E11.321, E11.3211, E11.3212, E11.3213, E11.3219, E11.329, E11.3291, E11.3292, E11.3293, E11.3299, E11.331, E11.3311, E11.3312, E11.3313, E11.3319, E11.339, E11.3391, E11.3392, E11.3393, E11.3399, E11.341, E11.3411, E11.3412, E11.3413, E11.3419, E11.349, E11.3491, E11.3492, E11.3493, E11.3499, E11.351, E11.3511, E11.3512, E11.3513, E11.3519, E11.3521, E11.3522, E11.3523, E11.3529, E11.3531, E11.3532, E11.3533, E11.3539, E11.3541, E11.3542, E11.3543, E11.3549, E11.3551, E11.3552, E11.3553, E11.3559, E11.359, E11.3591, E11.3592, E11.3593, E11.3599, E11.36, E11.37X1, E11.37X2, E11.37X3, E11.37X9, E11.39, E11.40, E11.41, E11.42, E11.43, E11.44, E11.49, E11.51, E11.52, E11.59, E11.610, E11.618, E11.620, E11.621, E11.622, E11.628, E11.630, E11.638, E11.641, E11.649, E11.65, E11.69, E11.8, E11.9, E13.00, E13.01, E13.10, E13.11, E13.21, E13.22, E13.29, E13.311, E13.319, E13.321, E13.3211, E13.3212, E13.3213, E13.3219, E13.329, E13.3291, E13.3292, E13.3293, E13.3299, E13.331, E13.3311, E13.3312, E13.3313, E13.3319, E13.339, E13.3391, E13.3392, E13.3393, E13.3399, E13.341, E13.3411, E13.3412, E13.3413, E13.3419, E13.349, E13.3491, E13.3492, E13.3493, E13.3499, E13.351, E13.3511, E13.3512, E13.3513, E13.3519, E13.3521, E13.3522, E13.3523, E13.3529, E13.3531, E13.3532, E13.3533, E13.3539, E13.3541, E13.3542, E13.3543, E13.3549, E13.3551, E13.3552, E13.3553, E13.3559, E13.3559, E13.3559, E13.359, E13.3591, E13.3592, E13.3593, E13.3599, E13.36, E13.37X1, E13.37X2, E13.37X3, E13.37X9, E13.39, E13.40, E13.41, E13.42, E13.43, E13.44, E13.49, E13.51, E13.52, E13.59, E13.610, E13.618, E13.620, E13.621, E13.622, E13.628, E13.630,

Description	ICD-10-CM
	E13.638, E13.641, E13.649, E13.65, E13.69, E13.8, E13.9, O24.011, O24.012, O24.013, O24.019, O24.02, O24.03, O24.111, O24.112, O24.113, O24.119, O24.12, O24.13, O24.311, O24.312, O24.313, O24.319, O24.32, O24.33, O24.811, O24.812, O24.813, O24.819, O24.82, O24.83

### Medications to Identify Diabetes Exclusions

Description	Prescription		
<b>Alpha-glucosidase inhibitors</b>	• Acarbose	• Miglitol	
<b>Amylin analogs</b>	• Pramlintide		
<b>Antidiabetic combinations</b>	• Alogliptin metformin • Alogliptin- pioglitazone • Canagliflozin- metformin • Dapagliflozin- metformin • Empagliflozin- linagliptin • Empagliflozin- metformin • Glimepiride- pioglitazone	• Glipizide- metformin • Glyburide- metformin • Linagliptin- metformin • Metformin- pioglitazone • Metformin- repaglinide • Metformin- rosiglitazone • Metformin- saxagliptin • Metformin- sitagliptin	
<b>Insulin</b>	• Insulin aspart • Insulin aspart-insulin aspart protamine • Insulin degludec • Insulin detemir • Insulin glargine • Insulin glulisine	• Insulin isophane human • Insulin isophane-insulin regular • Insulin lispro • Insulin lispro-insulin lispro protamine • Insulin regular human • Insulin human inhaled	
<b>Meglitinides</b>	• Nateglinide	• Repaglinide	
<b>Glucagon-like peptide-1 (GLP1) agonists</b>	• Dulaglutide • Exenatide		• Albiglutide • Liraglutide
<b>Sodium glucose cotransporter 2 (SGLT2) inhibitor</b>	• Canagliflozin	• Dapagliflozin	• Empagliflozin
<b>Sulfonylureas</b>	• Chlorpropamide • Glimepiride	• Glipizide • Glyburide	• Tolazamide • Tolbutamide
<b>Thiazolidinediones</b>	• Pioglitazone	• Rosiglitazone	
<b>Dipeptidyl peptidase-4 (DDP-4) inhibitors</b>	• Alogliptin • Linagliptin	• Saxagliptin • Sitagliptin	

### **Codes to Identify Colonoscopy**

CPT	HCPCS	ICD9PCS
44388-44394, 44397, 44401-44408, 45355, 45378-45393, 45398	G0105, G0121	45.22, 45.23, 45.25, 45.42, 45.43

### **Codes to Identify FOBT**

CPT	HCPCS	LOINC
82270, 82274	G0328	12503-9, 12504-7, 14563-1, 14564-9, 14565-6, 2335-8, 27396-1, 27401-9, 27925-7, 27926-5, 29771-3, 56490-6, 56491-4, 57905-2, 58453-2, 80372-6

### **Codes to Identify Flexible Sigmoidoscopy**

CPT	HCPCS	ICD9PCS
45330- 45335, 45337, 45338, 45339, 45340, 45341, 45342, 45345- 45347, 45349, 45350		G0104      45.24

### **Codes to Identify CT Colonography**

CPT	LOINC
74261, 74262, 74263	60515-4, 72531-7, 79069-1, 79071-7, 79101-2, 82688-3

### **Codes to Identify FIT- DNA test**

CPT	HCPCS	LONIC
81528	G0464	77353-1, 77354-9

### **Codes to Identify Exclusions for Colorectal Cancer Screening (anytime during the member's history)**

Description	HCPCS	ICD-10-CM	ICD9CM
Colorectal Cancer	G0213, G0214, G0215, G0231	C18.0- C18.9, C19, C20, C21.2, C21.8, C78.5, Z85.038, Z85.048	153.0- 153.9, 154.0, 154.1, 197.5, V10.05, V10.06
Description	CPT	ICD10PCS	ICD9PCS
Total Colectomy	44150-44153, 44155- 44158, 44210-44212	0DTE0ZZ, 0DTE4ZZ, 0DTE7ZZ, 0DTE8ZZ	45.81, 45.82, 45.83

### **Codes to Identify Advance Care Planning**

CPT	HCPCS	ICD-10-CM
99483, 99497, 1123F, 1124F, 1157F, 1158F	S0257	Z66

### **Codes to Identify Medication Review and Medication List**

CPT
90863, 99483, 99605, 99606
CPT-CAT-II
1159F, 1160F
HCPCS
G8427

### **Codes to Identify Functional Status Assessment**

CPT	CPT-CAT-II	HCPCS
99483	1170F	G0438, G0439

## Codes to Identify Pain Assessment

**CPT-CAT-II**

1125F, 1126F

### Biguanide Medications

<b>Biguanides</b>	
<ul style="list-style-type: none"> <li>• Metformin</li> </ul>	<ul style="list-style-type: none"> <li>• Glyburide and Metformin</li> </ul>
<b>Biguanide &amp; Sulfonylurea Combination Products</b>	
<ul style="list-style-type: none"> <li>• Glipizide and Metformin</li> </ul>	<ul style="list-style-type: none"> <li>• Pioglitazone and Metformin</li> </ul>
<b>Biguanide &amp; Thiazolidinedione Combination Products</b>	
<ul style="list-style-type: none"> <li>• Rosiglitazone and Metformin</li> </ul>	<ul style="list-style-type: none"> <li>• Repaglinide and Metformin</li> </ul>
<b>Biguanide &amp; Meglitinide Combinations</b>	
<ul style="list-style-type: none"> <li>• Repaglinide and Metformin</li> </ul>	<ul style="list-style-type: none"> <li>• Linagliptin and metformin</li> </ul>
<b>Biguanide &amp; DPP-IV Inhibitor Combinations</b>	
<ul style="list-style-type: none"> <li>• Sitagliptin and metformin IR and SR</li> <li>• saxagliptin &amp; metformin SR</li> </ul>	<ul style="list-style-type: none"> <li>• alogliptin and metformin</li> </ul>
<b>Biguanide &amp; SGLT2 Inhibitor Combinations</b>	
<ul style="list-style-type: none"> <li>• Dapagliflozin and Metformin</li> </ul>	<ul style="list-style-type: none"> <li>• Canagliflozin and metformin</li> <li>• Empagliflozin and metformin</li> </ul>

### Sulfonylurea Medications

<b>Sulfonylureas</b>	
<ul style="list-style-type: none"> <li>• Chlorpropamide</li> <li>• Glimepiride</li> <li>• Glipizide</li> </ul>	<ul style="list-style-type: none"> <li>• Glyburide</li> <li>• Tolazamide</li> <li>• Tolbutamide</li> </ul>
<b>Sulfonylurea &amp; Biguanide Combination Products</b>	
<ul style="list-style-type: none"> <li>• Glipizide and metformin</li> </ul>	<ul style="list-style-type: none"> <li>• Glyburide and Metformin</li> </ul>
<b>Sulfonylurea &amp; Thiazolidinedione Combination Products</b>	
<ul style="list-style-type: none"> <li>• Rosiglitazone and glimepiride</li> </ul>	<ul style="list-style-type: none"> <li>• Pioglitazone and Glimepiride</li> </ul>

### Thiazolidinedione Medications

<b>Thiazolidinediones</b>	
<ul style="list-style-type: none"> <li>• Pioglitazone</li> </ul>	<ul style="list-style-type: none"> <li>• Rosiglitazone</li> </ul>
<b>Thiazolidinedione &amp; Biguanide Combination Products</b>	
<ul style="list-style-type: none"> <li>• Rosiglitazone and metformin</li> </ul>	<ul style="list-style-type: none"> <li>• Pioglitazone and Metformin</li> </ul>
<b>Thiazolidinedione &amp; Sulfonylurea Combination Products</b>	
<ul style="list-style-type: none"> <li>• Rosiglitazone and glimepiride</li> </ul>	<ul style="list-style-type: none"> <li>• Pioglitazone and Glimepiride</li> </ul>
<b>Thiazolidinedione &amp; DPP-IV Inhibitor Combination Products</b>	
<ul style="list-style-type: none"> <li>• Alogliptin and Pioglitazone</li> </ul>	

### DPP-IV Inhibitor Medications

<b>DPP-IV Inhibitors Products</b>		
<ul style="list-style-type: none"> <li>• Sitagliptin</li> <li>• Linagliptin</li> </ul>	<ul style="list-style-type: none"> <li>• Saxagliptin</li> <li>• Alogliptin</li> </ul>	
<b>DPP-IV Inhibitor Combination Products</b>		
<ul style="list-style-type: none"> <li>• Sitagliptin and metformin IR and SR</li> <li>• Saxagliptin and metformin SR</li> </ul>	<ul style="list-style-type: none"> <li>• Sitagliptin and Simvastatin</li> <li>• Linagliptin and metformin</li> </ul>	<ul style="list-style-type: none"> <li>• Alogliptin and metformin</li> <li>• Alogliptin and Aloglitazone</li> <li>• Empagliflozin and Linagliptin</li> </ul>

### Incretin Mimetic Agents

#### Incretin Mimetic Agents

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>• Albiglutide</li> <li>• Exenatide</li> </ul> | <ul style="list-style-type: none"> <li>• Liraglutide</li> <li>• Dulaglutide</li> </ul> |
|--|--|

### Meglitinide Medications

#### Meglitinides

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• Nateglinide</li> </ul> | <ul style="list-style-type: none"> <li>• Repaglinide</li> <li>• Repaglinide and Metformin</li> </ul> |
|---|--|

### Sodium glucose co-transporter2 (SGLT2) inhibitors

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• Empagliflozin and Linagliptin</li> <li>• Empagliflozin and Metformin</li> <li>• Canagliflozin</li> </ul> | <ul style="list-style-type: none"> <li>• Canagliflozin and Metformin</li> <li>• Empagliflozin and Metformin</li> <li>• Empagliflozin</li> <li>• Dapagliflozin</li> </ul> |
|---|--|

### Insulins (Exclusion Table)

#### Human Insulins

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>• Insulin Aspart</li> <li>• Insulin Aspart Protamine and Aspart</li> <li>• Insulin Detemir</li> <li>• Insulin Glargine</li> <li>• Insulin Glulisine</li> <li>• Insulin Regular (Human) Inhalation Powder</li> </ul> | <ul style="list-style-type: none"> <li>• Insulin Isophane &amp; Regular Human Insulin</li> <li>• Insulin Isophane (Human N)</li> <li>• insulin Lispro</li> <li>• insulin Lispro Protamine &amp; Insulin Lispro</li> <li>• Insulin Regular (Human R)</li> <li>• Insulin Degludec</li> </ul> |
|--|--|

### RAS Antagonist Hypertension Medications

#### Direct Renin Inhibitor Medications

- Aliskiren

#### ARB Medications

- |  |  |   |   |
|--|--|---|---|
| <ul style="list-style-type: none"> <li>• Candesartan</li> <li>• Erosartan</li> </ul> | <ul style="list-style-type: none"> <li>• Irbesartan</li> <li>• Losartan</li> </ul> | <ul style="list-style-type: none"> <li>• Olmesartan</li> <li>• Telmisartan</li> </ul> | <ul style="list-style-type: none"> <li>• Valsartan</li> <li>• Azilsartan</li> </ul> |
|--|--|---|---|

#### ACE Inhibitor Medications

- |   |   |   |  |  |
|---|---|---|--|--|
| <ul style="list-style-type: none"> <li>• Benazepril</li> <li>• Captopril</li> </ul> | <ul style="list-style-type: none"> <li>• Enalapril</li> <li>• Fosinopril</li> </ul> | <ul style="list-style-type: none"> <li>• Lisinopril</li> <li>• Moexipril</li> </ul> | <ul style="list-style-type: none"> <li>• Perindopril</li> <li>• Quinapril</li> </ul> | <ul style="list-style-type: none"> <li>• Ramipril</li> <li>• Trandolapril</li> </ul> |
|---|---|---|--|--|

#### ACE Inhibitor Combination Products

- |   |   |   |  |
|---|---|---|--|
| <ul style="list-style-type: none"> <li>• Amlodipine and Benazepril</li> <li>• Benazepril and HCTZ</li> <li>• Catopril and HCTZ</li> </ul> | <ul style="list-style-type: none"> <li>• Enalapril and HCTZ</li> <li>• Fosinopril and HCTZ</li> </ul> | <ul style="list-style-type: none"> <li>• Lisinopril and HCTZ</li> <li>• Moexipril and HCTZ</li> </ul> | <ul style="list-style-type: none"> <li>• Quinapril and HCTZ</li> <li>• Trandolapril-verapamil HCL</li> <li>• Perindopril and Amlodipine</li> </ul> |
|---|---|---|--|

#### ARB Combination Products

- |  |  |   |   |
|--|--|---|---|
| <ul style="list-style-type: none"> <li>• Candesartan and HCTZ</li> <li>• Erosartan and HCTZ</li> <li>• Telmisartan and amlodipine</li> </ul> | <ul style="list-style-type: none"> <li>• Irbesartan and HCTZ</li> <li>• Losartan and HCTZ</li> <li>• Amlodipine and Olmesartan</li> <li>• Azilsartan and Chlorthalidone</li> </ul> | <ul style="list-style-type: none"> <li>• Olmesartan and HCTZ</li> <li>• Telmisartan and HCTZ</li> <li>• Olmesartan and Amlodipine and HCTZ</li> </ul> | <ul style="list-style-type: none"> <li>• Valsartan and HCTZ</li> <li>• Amlodipine and valsartan</li> <li>• Amlodipine and Valsartan and HCTZ</li> </ul> |
|--|--|---|---|

<b>Direct Renin Inhibitor Combination Products</b>		
• Aliskiren and Amlodipine	• Aliskiren and Amlodipine and HCTZ	• Aliskiren and HCTZ

### **Medications to Identify Colorectal Cancer Screening Exclusions**

#### **ARB/Neprilysin Inhibitor Combination Medication**

- Sacubitril/ Valsartan

### **Statin Cholesterol Medications**

#### **Statin Medications**

• Lovastatin	• Fluvastatin	• Pravastatin	• Simvastatin
<b>Statin Combination Products</b>			
• Niacin and Lovastatin	• Niacin and Simvastatin	• Ezetimibe and Simvastatin	• Ezetimibe and Atorvastatin
• Atorvastatin and Amlodipine	• Sitagliptin and Simvastatin		

### **Codes to Identify Acute Bronchitis**

#### **ICD-10-CM**

J20.3, J20.4, J20.5, J20.6, J20.7, J20.8, J20.9, J21.0, J21.1, J21.8, J21.9

### **Codes to Identify Exclusions from Acute Bronchitis Treatment due to Comorbidities**

<b>Description</b>	<b>ICD-10-CM</b>
HIV	B20, Z21
HIV Type 2	B97.35
Malignant Neoplasms	C00.0, C00.1, C00.2, C00.3, C00.4, C00.5, C00.6, C00.8, C00.9, C01, C02.0, C02.1, C02.2, C02.3, C02.4, C02.8, C02.9, C03.0, C03.1, C03.9, C04.0, C04.1, C04.8, C04.9, C05.0, C05.1, C05.2, C05.8, C05.9, C06.0, C06.1, C06.2, C06.80, C06.89, C06.9, C07, C08.0, C08.1, C08.9, C09.0, C09.1, C09.8, C09.9, C10.0, C10.1, C10.2, C10.3, C10.4, C10.8, C10.9, C11.0, C11.1, C11.2, C11.3, C11.8, C11.9, C12, C13.0, C13.1, C13.2, C13.8, C13.9, C14.0, C14.2, C14.8, C15.3, C15.4, C15.5, C15.8, C15.9, C16.0, C16.1, C16.2, C16.3, C16.4, C16.5, C16.6, C16.8, C16.9, C17.0, C17.1, C17.2, C17.3, C17.8, C17.9, C18.0, C18.1, C18.2, C18.3, C18.4, C18.5, C18.6, C18.7, C18.8, C18.9, C19, C20, C21.0, C21.1, C21.2, C21.8, C22.0, C22.1, C22.2, C22.3, C22.4, C22.7, C22.8, C22.9, C23, C24.0, C24.1, C24.8, C24.9, C25.0, C25.1, C25.2, C25.3, C25.4, C25.7, C25.8, C25.9, C26.0, C26.1, C26.9, C30.0, C30.1, C31.0, C31.1, C31.2, C31.3, C31.8, C31.9, C32.0, C32.1, C32.2, C32.3, C32.8, C32.9, C33, C34.00, C34.01, C34.02, C34.10, C34.11, C34.12, C34.2, C34.30, C34.31, C34.32, C34.80, C34.81, C34.82, C34.90, C34.91, C34.92, C37, C38.0, C38.1, C38.2, C38.3, C38.4, C38.8, C39.0, C39.9, C40.00, C40.01, C40.02, C40.10, C40.11, C40.12, C40.20, C40.21, C40.22, C40.30, C40.31, C40.32, C40.80, C40.81, C40.82, C40.90, C40.91, C40.92, C41.0, C41.1, C41.2, C41.3, C41.4, C41.9, C43.0, C43.10, C43.11, C43.111, C43.112, C43.12, C43.121, C43.122, C43.20, C43.21, C43.22, C43.30, C43.31, C43.39, C43.4, C43.51, C43.52, C43.59, C43.60, C43.61, C43.62, C43.70, C43.71, C43.72, C43.8, C43.9, C45.0, C45.1, C45.2, C45.7, C45.9, C46.0, C46.1, C46.2, C46.3, C46.4, C46.50, C46.51, C46.52, C46.7, C46.9, C47.0, C47.10, C47.11, C47.12, C47.20, C47.21, C47.22, C47.3, C47.4, C47.5, C47.6, C47.8, C47.9, C48.0, C48.1, C48.2, C48.8, C49.0, C49.10, C49.11, C49.12, C49.20, C49.21, C49.22, C49.3, C49.4, C49.5, C49.6, C49.8, C49.9, C49.A0, C49.A1, C49.A2, C49.A3, C49.A4, C49.A5, C49.A9, C4A.0, C4A.10, C4A.11, C4A.111, C4A.112, C4A.12, C4A.121, C4A.122, C4A.20, C4A.21, C4A.22, C4A.30, C4A.31, C4A.39, C4A.4, C4A.51, C4A.52, C4A.59, C4A.60, C4A.61, C4A.62, C4A.70, C4A.71, C4A.72, C4A.8, C4A.9, C50.011, C50.012, C50.019, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.422, C50.429, C50.511, C50.512,

Description	ICD-10-CM
	C50.519, C50.521, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C51.0, C51.1, C51.2, C51.8, C51.9, C52, C53.0, C53.1, C53.8, C53.9, C54.0, C54.1, C54.2, C54.3, C54.8, C54.9, C55, C56.1, C56.2, C56.9, C57.00, C57.01, C57.02, C57.10, C57.11, C57.12, C57.20, C57.21, C57.22, C57.3, C57.4, C57.7, C57.8, C57.9, C58, C60.0, C60.1, C60.2, C60.8, C60.9, C61, C62.00, C62.01, C62.02, C62.10, C62.11, C62.12, C62.90, C62.91, C62.92, C63.00, C63.01, C63.02, C63.10, C63.11, C63.12, C63.2, C63.7, C63.8, C63.9, C64.1, C64.2, C64.9, C65.1, C65.2, C65.9, C66.1, C66.2, C66.9, C67.0, C67.1, C67.2, C67.3, C67.4, C67.5, C67.6, C67.7, C67.8, C67.9, C68.0, C68.1, C68.8, C68.9, C69.00, C69.01, C69.02, C69.10, C69.11, C69.12, C69.20, C69.21, C69.22, C69.30, C69.31, C69.32, C69.40, C69.41, C69.42, C69.50, C69.51, C69.52, C69.60, C69.61, C69.62, C69.80, C69.81, C69.82, C69.90, C69.91, C69.92, C70.0, C70.1, C70.9, C71.0, C71.1, C71.2, C71.3, C71.4, C71.5, C71.6, C71.7, C71.8, C71.9, C72.0, C72.1, C72.20, C72.21, C72.22, C72.30, C72.31, C72.32, C72.40, C72.41, C72.42, C72.50, C72.59, C72.9, C73, C74.00, C74.01, C74.02, C74.10, C74.11, C74.12, C74.90, C74.91, C74.92, C75.0, C75.1, C75.2, C75.3, C75.4, C75.5, C75.8, C75.9, C76.0, C76.1, C76.2, C76.3, C76.40, C76.41, C76.42, C76.50, C76.51, C76.52, C76.8, C77.0, C77.1, C77.2, C77.3, C77.4, C77.5, C77.8, C77.9, C78.00, C78.01, C78.02, C78.1, C78.2, C78.30, C78.39, C78.4, C78.5, C78.6, C78.7, C78.80, C78.89, C79.00, C79.01, C79.02, C79.10, C79.11, C79.19, C79.2, C79.31, C79.32, C79.40, C79.49, C79.51, C79.52, C79.60, C79.61, C79.62, C79.70, C79.71, C79.72, C79.81, C79.82, C79.89, C79.9, C7A.00, C7A.010, C7A.011, C7A.012, C7A.019, C7A.020, C7A.021, C7A.022, C7A.023, C7A.024, C7A.025, C7A.026, C7A.029, C7A.090, C7A.091, C7A.092, C7A.093, C7A.094, C7A.095, C7A.096, C7A.098, C7A.1, C7A.8, C7B.00, C7B.01, C7B.02, C7B.03, C7B.04, C7B.09, C7B.1, C7B.8, C80.0, C80.1, C80.2, C81.00, C81.01, C81.02, C81.03, C81.04, C81.05, C81.06, C81.07, C81.08, C81.09, C81.10, C81.11, C81.12, C81.13, C81.14, C81.15, C81.16, C81.17, C81.18, C81.19, C81.20, C81.21, C81.22, C81.23, C81.24, C81.25, C81.26, C81.27, C81.28, C81.29, C81.30, C81.31, C81.32, C81.33, C81.34, C81.35, C81.36, C81.37, C81.38, C81.39, C81.40, C81.41, C81.42, C81.43, C81.44, C81.45, C81.46, C81.47, C81.48, C81.49, C81.70, C81.71, C81.72, C81.73, C81.74, C81.75, C81.76, C81.77, C81.78, C81.79, C81.90, C81.91, C81.92, C81.93, C81.94, C81.95, C81.96, C81.97, C81.98, C81.99, C82.00, C82.01, C82.02, C82.03, C82.04, C82.05, C82.06, C82.07, C82.08, C82.09, C82.10, C82.11, C82.12, C82.13, C82.14, C82.15, C82.16, C82.17, C82.18, C82.19, C82.20, C82.21, C82.22, C82.23, C82.24, C82.25, C82.26, C82.27, C82.28, C82.29, C82.30, C82.31, C82.32, C82.33, C82.34, C82.35, C82.36, C82.37, C82.38, C82.39, C82.40, C82.41, C82.42, C82.43, C82.44, C82.45, C82.46, C82.47, C82.48, C82.49, C82.50, C82.51, C82.52, C82.53, C82.54, C82.55, C82.56, C82.57, C82.58, C82.59, C82.60, C82.61, C82.62, C82.63, C82.64, C82.65, C82.66, C82.67, C82.68, C82.69, C82.80, C82.81, C82.82, C82.83, C82.84, C82.85, C82.86, C82.87, C82.88, C82.89, C82.90, C82.91, C82.92, C82.93, C82.94, C82.95, C82.96, C82.97, C82.98, C82.99, C83.00, C83.01, C83.02, C83.03, C83.04, C83.05, C83.06, C83.07, C83.08, C83.09, C83.10, C83.11, C83.12, C83.13, C83.14, C83.15, C83.16, C83.17, C83.18, C83.19, C83.30, C83.31, C83.32, C83.33, C83.34, C83.35, C83.36, C83.37, C83.38, C83.39, C83.50, C83.51, C83.52, C83.53, C83.54, C83.55, C83.56, C83.57, C83.58, C83.59, C83.70, C83.71, C83.72, C83.73, C83.74, C83.75, C83.76, C83.77, C83.78, C83.79, C83.80, C83.81, C83.82, C83.83, C83.84, C83.85, C83.86, C83.87, C83.88, C83.89, C83.90, C83.91, C83.92, C83.93, C83.94, C83.95, C83.96, C83.97, C83.98, C83.99, C84.00, C84.01, C84.02, C84.03, C84.04, C84.05, C84.06, C84.07, C84.08, C84.09, C84.10, C84.11, C84.12, C84.13, C84.14, C84.15, C84.16, C84.17, C84.18, C84.19, C84.40, C84.41, C84.42, C84.43, C84.44, C84.45, C84.46, C84.47, C84.48, C84.49, C84.60, C84.61, C84.62, C84.63, C84.64, C84.65, C84.66, C84.67, C84.68, C84.69, C84.70, C84.71, C84.72, C84.73, C84.74, C84.75, C84.76, C84.77, C84.78, C84.79, C84.90, C84.91, C84.92, C84.93, C84.94, C84.95, C84.96, C84.97, C84.98, C84.99, C84.A0, C84.A1, C84.A2, C84.A3, C84.A4, C84.A5, C84.A6, C84.A7, C84.A8, C84.A9, C84.Z0, C84.Z1, C84.Z2, C84.Z3, C84.Z4, C84.Z5, C84.Z6, C84.Z7, C84.Z8, C84.Z9, C85.10, C85.11, C85.12, C85.13, C85.14, C85.15, C85.16, C85.17, C85.18, C85.19, C85.20, C85.21, C85.22, C85.23, C85.24, C85.25, C85.26, C85.27, C85.28, C85.29, C85.80, C85.81, C85.82, C85.83, C85.84, C85.85, C85.86, C85.87, C85.88, C85.89, C85.90, C85.91, C85.92, C85.93, C85.94, C85.95, C85.96, C85.97, C85.98, C85.99, C86.0, C86.1, C86.2, C86.3, C86.4,

Description	ICD-10-CM
	C86.5, C86.6, C88.0, C88.2, C88.3, C88.4, C88.8, C88.9, C90.00, C90.01, C90.02, C90.10, C90.11, C90.12, C90.20, C90.21, C90.22, C90.30, C90.31, C90.32, C91.00, C91.01, C91.02, C91.10, C91.11, C91.12, C91.30, C91.31, C91.32, C91.40, C91.41, C91.42, C91.50, C91.51, C91.52, C91.60, C91.61, C91.62, C91.90, C91.91, C91.92, C91.A0, C91.A1, C91.A2, C91.Z0, C91.Z1, C91.Z2, C92.00, C92.01, C92.02, C92.10, C92.11, C92.12, C92.20, C92.21, C92.22, C92.30, C92.31, C92.32, C92.40, C92.41, C92.42, C92.50, C92.51, C92.52, C92.60, C92.61, C92.62, C92.90, C92.91, C92.92, C92.A0, C92.A1, C92.A2, C92.Z0, C92.Z1, C92.Z2, C93.00, C93.01, C93.02, C93.10, C93.11, C93.12, C93.30, C93.31, C93.32, C93.90, C93.91, C93.92, C93.Z0, C93.Z1, C93.Z2, C94.00, C94.01, C94.02, C94.20, C94.21, C94.22, C94.30, C94.31, C94.32, C94.40, C94.41, C94.42, C94.6, C94.80, C94.81, C94.82, C95.00, C95.01, C95.02, C95.10, C95.11, C95.12, C95.90, C95.91, C95.92, C96.0, C96.2, C96.20, C96.21, C96.22, C96.29, C96.4, C96.5, C96.6, C96.9, C96.A, C96.Z
Emphysema	J43.0, J43.1, J43.2, J43.8, J43.9
COPD	J44.0, J44.1, J44.9
Cystic Fibrosis	E84.0, E84.11, E38.19, E84.8, E84.9
Comorbid Conditions	A15.0, A15.4, A15.5, A15.6, A15.7, A15.8, A15.9, A17.0, A17.1, A17.81, A17.82, A17.83, A17.89, A17.9, A18.01, A18.02, A18.03, A18.09, A18.10, A18.11, A18.12, A18.13, A18.14, A18.15, A18.16, A18.17, A18.18, A18.2, A18.31, A18.32, A18.39, A18.4, A18.50, A18.51, A18.52, A18.53, A18.54, A18.59, A18.6, A18.7, A18.81, A18.82, A18.83, A18.84, A18.85, A18.89, A19.0, A19.1, A19.2, A19.8, A19.9, B44.81, D57.01, D57.211, D57.411, D57.811, D61.810, D61.811, D61.818, D70.0, D70.1, D70.2, D70.3, D70.4, D70.8, D70.9, D71, D72.0, D75.81, D76.1, D76.2, D76.3, D86.0, D86.1, D86.2, E84.0, E84.11, E84.19, E84.8, E84.9, J22, J41.0, J41.1, J41.8, J42, J47.0, J47.1, J47.9, J60, J61, J62.0, J62.8, J63.0, J63.1, J63.2, J63.3, J63.4, J63.5, J63.6, J64, J65, J66.0, J66.1, J66.2, J66.8, J67.0, J67.1, J67.2, J67.3, J67.4, J67.5, J67.6, J67.7, J67.8, J67.9, J68.0, J68.1, J68.2, J68.3, J68.9, J69.0, J69.1, J69.8, J70.0, J70.1, J70.2, J70.3, J70.4, J70.5, J70.8, J70.9, J80, J81.0, J81.1, J82, J84.01, J84.02, J84.03, J84.09, J84.10, J84.111, J84.112, J84.113, J84.114, J84.115, J84.116, J84.117, J84.17, J84.2, J84.81, J84.82, J84.83, J84.841, J84.842, J84.843, J84.848, J84.89, J84.9, J85.0, J85.1, J85.2, J85.3, J86.0, J86.9, J90, J91.0, J91.8, J92.0, J92.9, J93.0, J93.11, J93.12, J93.81, J93.82, J93.83, J93.9, J94.0, J94.1, J94.2, J94.8, J94.9, J95.00, J95.01, J95.02, J95.03, J95.04, J95.09, J95.1, J95.2, J95.3, J95.4, J95.5, J95.61, J95.62, J95.71, J95.72, J95.811, J95.812, J95.821, J95.822, J95.830, J95.831, J95.84, J95.850, J95.851, J95.859, J95.860, J95.861, J95.862, J95.863, J95.88, J95.89, J96.00, J96.01, J96.02, J96.10, J96.11, J96.12, J96.20, J96.21, J96.22, J96.90, J96.91, J96.92, J98.51, J98.6, J99, M05.10, M05.111, M05.112, M05.119, M05.121, M05.122, M05.129, M05.131, M05.132, M05.139, M05.141, M05.142, M05.149, M05.151, M05.152, M05.159, M05.161, M05.162, M05.169, M05.171, M05.172, M05.179, M05.19, M30.1, M32.13, M33.01, M33.11, M33.21, M33.91, M34.81, M35.02, O98.011, O98.012, O98.013, O98.019, O98.02, O98.03, P27.0, P27.1, P27.8, P27.9, Q25.45, Q25.47, Q25.48, Q30.0, Q30.1, Q30.2, Q30.3, Q30.8, Q30.9, Q31.0, Q31.1, Q31.2, Q31.3, Q31.5, Q31.8, Q31.9, Q32.0, Q32.1, Q32.2, Q32.3, Q32.4, Q33.0, Q33.1, Q33.2, Q33.3, Q33.4, Q33.5, Q33.6, Q33.8, Q33.9, Q34.0, Q34.1, Q34.8, Q34.9, Q39.0, Q39.1, Q39.2, Q39.3, Q39.4, Q89.01, Q89.3
Disorders of the Immune System	D80.0, D80.1, D80.2, D80.3, D80.4, D80.5, D80.6, D80.7, D80.8, D80.9, D81.0, D81.1, D81.2, D81.4, D81.6, D81.7, D81.89, D81.9, D82.0, D82.1, D82.2, D82.3, D82.4, D82.8, D82.9, D83.0, D83.1, D83.2, D83.8, D83.9, D84.0, D84.1, D84.8, D84.9, D89.3, D89.810, D89.811, D89.812, D89.813, D89.82, D89.89, D89.9
Other Malignant Neoplasm of the Skin	C44.00, C44.01, C44.02, C44.09, C44.101, C44.102, C44.1021, C44.1022, C44.109, C44.1091, C44.1092, C44.111, C44.112, C44.1121, C44.1122, C44.119, C44.1191, C44.1192, C44.121, C44.122, C44.1221, C44.1222, C44.129, C44.1291, C44.1292, C44.131, C44.1321, C44.1322, C44.1391, C44.1392, C44.191, C44.192, C44.1921, C44.1922, C44.199, C44.1991, C44.1992, C44.201, C44.202, C44.209, C44.211, C44.212, C44.219, C44.221, C44.222, C44.229, C44.291, C44.292, C44.299, C44.300, C44.301, C44.309, C44.310, C44.311, C44.319, C44.320, C44.321, C44.329, C44.390, C44.391, C44.399, C44.40, C44.41, C44.42, C44.49, C44.500, C44.501, C44.509, C44.510, C44.511, C44.519, C44.520, C44.521, C44.529, C44.590, C44.591, C44.599,

Description	ICD-10-CM
	C44.601, C44.602, C44.609, C44.611, C44.612, C44.619, C44.621, C44.622, C44.629, C44.691, C44.692, C44.699, C44.701, C44.702, C44.709, C44.711, C44.712, C44.719, C44.721, C44.722, C44.729, C44.791, C44.792, C44.799, C44.80, C44.81, C44.82, C44.89, C44.90, C44.91, C44.92, C44.99

### Medications to Identify Bronchitis Exclusions

Aminoglycosides		
• Amikacin	• Streptomycin	• Tobramycin
• Gentamicin		
Aminopenicillins		
• Amoxicillin	• Ampicillin	
Beta-Lactamase Inhibitors		
• Amoxicillin-Clavulanate	• Piperacillin-Tazobactam	
• Ampicillin-Sulbactam		
First-Generation Cephalosporins		
• Cefadroxil	• Cefazolin	• Cephalexin
Fourth-Generation Cephalosporins		
	• Cefepime	
Ketolides		
	• Telithromycin	
Lincomycin Derivatives		
• Clindamycin	• Lincomycin	
Macrolides		
• Azithromycin	• Erythromycin	• Erythromycin Lactobionate
• Clarithromycin	• Erythromycin Ethylsuccinate	• Erythromycin Stearate
Miscellaneous Antibiotics		
• Aztreonam	• Daptomycin	• Metronidazole
• Chloramphenicol	• Linezolid	• Vancomycin
• Dalfopristin-Quinupristin		
Natural Penicillins		
• Penicillin G Benzathine-Procaine	• Penicillin G Procaine	• Penicillin V Potassium
• Penicillin G Potassium	• Penicillin G Sodium	• Penicillin G Benzathine
Penicillinase Resistant Penicillins		
• Dicloxacillin	• Nafcillin	• Oxacillin
Quinolones		
• Ciprofloxacin	• Levofloxacin	• Ofloxacin
• Gemifloxacin	• Moxifloxacin	
Rifamycin Derivatives		
	• Rifampin	
Second-Generation Cephalosporin		
• Cefaclor	• Cefotetan	• Cefuroxime
	• Cefprozil	
Sulfonamides		
• Sulfadiazine		• Sulfamethoxazole-Trimethoprim
Tetracyclines		
• Doxycycline	• Minocycline	• Tetracycline
Third-Generation Cephalosporins		
• Cefdinir	• Cefotaxime	• Ceftibuten
• Cefditoren	• Cefpodoxime	• Ceftriazone

• Cefixime	• Ceftazidime	
<b>Urinary Anti-Infectives</b>		
• Fosfomycin • Nitrofurantoin	• Nitrofurantoin Macrocrystals • Trimethoprim	• Nitrofurantoin Macrocysts-Monohydrate

### Codes to Identify Exclusion of Treatment for Acute Bronchitis due to Competing Diagnosis

Description	ICD-10-CM
Pharyngitis	J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91
Competing Diagnosis	A00.0, A00.1, A00.9, A01.00, A01.01, A01.02, A01.03, A01.04, A01.05, A01.09, A01.1, A01.2, A01.3, A01.4, A02.0, A02.1, A02.20, A02.21, A02.22, A02.23, A02.24, A02.25, A02.29, A02.8, A02.9, A03.0, A03.1, A03.2, A03.3, A03.8, A03.9, A04.0, A04.1, A04.2, A04.3, A04.4, A04.5, A04.6, A04.7, A04.71, A04.72, A04.8, A04.9, A05.0, A05.1, A05.2, A05.3, A05.4, A05.5, A05.8, A05.9, A06.0, A06.1, A06.2, A06.3, A06.4, A06.5, A06.6, A06.7, A06.81, A06.82, A06.89, A06.9, A07.0, A07.1, A07.2, A07.3, A07.4, A07.8, A07.9, A08.0, A08.11, A08.19, A08.2, A08.31, A08.32, A08.39, A08.4, A08.8, A09, A37.00, A37.01, A37.10, A37.11, A37.80, A37.81, A37.90, A37.91, A44.0, A44.1, A44.8, A44.9, A49.9, A50.01, A50.02, A50.03, A50.04, A50.05, A50.06, A50.07, A50.08, A50.09, A50.1, A50.2, A50.30, A50.31, A50.32, A50.39, A50.40, A50.41, A50.42, A50.43, A50.44, A50.45, A50.49, A50.51, A50.52, A50.53, A50.54, A50.55, A50.56, A50.57, A50.59, A50.6, A50.7, A50.9, A51.0, A51.1, A51.2, A51.31, A51.32, A51.39, A51.41, A51.42, A51.43, A51.44, A51.45, A51.46, A51.49, A51.5, A51.9, A52.00, A52.01, A52.02, A52.03, A52.04, A52.05, A52.06, A52.09, A52.10, A52.11, A52.12, A52.13, A52.14, A52.15, A52.16, A52.17, A52.19, A52.2, A52.3, A52.71, A52.72, A52.73, A52.74, A52.75, A52.76, A52.77, A52.78, A52.79, A52.8, A52.9, A53.0, A53.9, A54.00, A54.01, A54.02, A54.03, A54.09, A54.1, A54.21, A54.22, A54.23, A54.24, A54.29, A54.30, A54.31, A54.32, A54.33, A54.39, A54.40, A54.41, A54.42, A54.43, A54.49, A54.5, A54.6, A54.81, A54.82, A54.83, A54.84, A54.85, A54.86, A54.89, A54.9, A55, A56.00, A56.01, A56.02, A56.09, A56.11, A56.19, A56.2, A56.3, A56.4, A56.8, A57, A58, A59.00, A59.01, A59.02, A59.03, A59.09, A59.8, A59.9, A63.0, A63.8, A64, A69.0, A69.1, A69.20, A69.21, A69.22, A69.23, A69.29, A69.8, A69.9, B60.0, B60.10, B60.11, B60.12, B60.13, B60.19, B60.2, B60.8, B64, B78.1, B96.89, E83.2, H66.001, H66.002, H66.003, H66.004, H66.005, H66.006, H66.007, H66.009, H66.011, H66.012, H66.013, H66.014, H66.015, H66.016, H66.017, H66.019, H66.10, H66.11, H66.12, H66.13, H66.20, H66.21, H66.22, H66.23, H66.3X1, H66.3X2, H66.3X3, H66.3X9, H66.40, H66.41, H66.42, H66.43, H66.90, H66.91, H66.92, H66.93, H67.1, H67.2, H67.3, H67.9, H70.001, H70.002, H70.003, H70.009, H70.011, H70.012, H70.013, H70.019, H70.091, H70.092, H70.093, H70.099, H70.10, H70.11, H70.12, H70.13, H70.201, H70.202, H70.203, H70.209, H70.211, H70.212, H70.213, H70.219, H70.221, H70.222, H70.223, H70.229, H70.811, H70.812, H70.813, H70.819, H70.891, H70.892, H70.893, H70.899, H70.90, H70.91, H70.92, H70.93, H95.00, H95.01, H95.02, H95.03, H95.111, H95.112, H95.113, H95.119, H95.121, H95.122, H95.123, H95.129, H95.131, H95.132, H95.133, H95.139, H95.191, H95.192, H95.193, H95.199, H95.21, H95.22, H95.31, H95.32, H95.41, H95.42, H95.51, H95.52, H95.53, H95.54, H95.811, H95.812, H95.813, H95.819, H95.88, H95.89, J01.00, J01.01, J01.10, J01.11, J01.20, J01.21, J01.30, J01.31, J01.40, J01.41, J01.80, J01.81, J01.90, J01.91, J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91, J04.10, J04.11, J04.2, J05.0, J05.10, J05.11, J13, J14, J15.0, J15.1, J15.20, J15.211, J15.212, J15.29, J15.3, J15.4, J15.5, J15.6, J15.7, J15.8, J15.9, J16.0, J16.8, J17, J18.0, J18.1, J18.8, J18.9, J20.0, J20.1, J20.2, J32.0, J32.1, J32.2, J32.3, J32.4, J32.8, J32.9, J35.01, J35.02, J35.03, J35.1, J35.2, J35.3, J35.8, J35.9, J38.7, J39.0, J39.1, J39.2, J39.8, J39.9, K12.2, L01.00, L01.01, L01.02, L01.03, L01.09, L01.1, L03.011, L03.012, L03.019, L03.021, L03.022, L03.029, L03.031, L03.032, L03.039, L03.041, L03.042, L03.049, L03.111, L03.112, L03.113, L03.114, L03.115, L03.116, L03.119, L03.121, L03.122, L03.123, L03.124, L03.125, L03.126, L03.129, L03.211, L03.212, L03.213, L03.221, L03.222, L03.311, L03.312, L03.313, L03.314, L03.315, L03.316, L03.317, L03.319, L03.321, L03.322, L03.323, L03.324, L03.325, L03.326, L03.327, L03.329, L03.811, L03.818, L03.891,

Description	ICD-10-CM
	L03.898, L03.90, L03.91, L04.0, L04.1, L04.2, L04.3, L04.8, L04.9, L08.1, L08.81, L08.82, L08.89, L08.9, L88, L92.8, L98.0, L98.3, M46.20, M46.21, M46.22, M46.23, M46.24, M46.25, M46.26, M46.27, M46.28, M46.30, M46.31, M46.32, M46.33, M46.34, M46.35, M46.36, M46.37, M46.38, M46.39, M89.00, M89.011, M89.012, M89.019, M89.021, M89.022, M89.029, M89.031, M89.032, M89.039, M89.041, M89.042, M89.049, M89.051, M89.052, M89.059, M89.061, M89.062, M89.069, M89.071, M89.072, M89.079, M89.08, M89.09, M89.121, M89.122, M89.123, M89.124, M89.125, M89.126, M89.127, M89.128, M89.129, M89.131, M89.132, M89.133, M89.134, M89.138, M89.139, M89.151, M89.152, M89.153, M89.154, M89.155, M89.156, M89.157, M89.158, M89.159, M89.160, M89.161, M89.162, M89.163, M89.164, M89.165, M89.166, M89.167, M89.168, M89.169, M89.18, M89.20, M89.211, M89.212, M89.219, M89.221, M89.222, M89.229, M89.231, M89.232, M89.233, M89.234, M89.239, M89.241, M89.242, M89.249, M89.251, M89.252, M89.259, M89.261, M89.262, M89.263, M89.264, M89.269, M89.271, M89.272, M89.279, M89.28, M89.29, M89.30, M89.311, M89.312, M89.319, M89.321, M89.322, M89.329, M89.331, M89.332, M89.333, M89.334, M89.339, M89.341, M89.342, M89.349, M89.351, M89.352, M89.359, M89.361, M89.362, M89.363, M89.364, M89.369, M89.371, M89.372, M89.379, M89.38, M89.39, M89.40, M89.411, M89.412, M89.419, M89.421, M89.422, M89.429, M89.431, M89.432, M89.439, M89.441, M89.442, M89.449, M89.451, M89.452, M89.459, M89.461, M89.462, M89.469, M89.471, M89.472, M89.479, M89.48, M89.49, M89.50, M89.511, M89.512, M89.519, M89.521, M89.522, M89.529, M89.531, M89.532, M89.539, M89.541, M89.542, M89.549, M89.551, M89.552, M89.559, M89.561, M89.562, M89.569, M89.571, M89.572, M89.579, M89.58, M89.59, M89.60, M89.611, M89.612, M89.619, M89.621, M89.622, M89.629, M89.631, M89.632, M89.639, M89.641, M89.642, M89.649, M89.651, M89.652, M89.659, M89.661, M89.662, M89.669, M89.671, M89.672, M89.679, M89.68, M89.69, M89.70, M89.711, M89.712, M89.719, M89.721, M89.722, M89.729, M89.731, M89.732, M89.739, M89.741, M89.742, M89.749, M89.751, M89.752, M89.759, M89.761, M89.762, M89.769, M89.771, M89.772, M89.779, M89.78, M89.79, M89.8X0, M89.8X1, M89.8X2, M89.8X3, M89.8X4, M89.8X5, M89.8X6, M89.8X7, M89.8X8, M89.8X9, M89.9, M90.80, M90.811, M90.812, M90.819, M90.821, M90.822, M90.829, M90.831, M90.832, M90.839, M90.841, M90.842, M90.849, M90.851, M90.852, M90.859, M90.861, M90.862, M90.869, M90.871, M90.872, M90.879, M90.88, M90.89, N10, N11.0, N11.1, N11.8, N11.9, N12, N13.0, N13.6, N15.1, N16, N28.84, N28.85, N28.86, N30.00, N30.01, N30.10, N30.11, N30.20, N30.21, N30.30, N30.31 N30.40, N30.41, N30.80, N30.81, N30.90, N30.91, N39.0, N41.0, N41.1, N41.2, N41.3, N41.4, N41.8, N41.9, N70.01, N70.02, N70.03, N70.11, N70.12, N70.13, N70.91, N70.92, N70.93, N71.0, N71.1, N71.9, N72, N73.0, N73.1, N73.2, N73.3, N73.4, N73.5, N73.6, N73.8, N73.9, N74, N75.0, N75.1, N75.8, N75.9, N76.0, N76.1, N76.2, N76.3, N76.4, N76.5, N76.6, N76.81, N76.89, N77.0, N77.1, Z20.2, Z22.4

#### Codes to Identify Outpatient Visits with a Diagnosis of HTN

Description	CPT	HCPCS	LOINC
Outpatient Visit	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, 99429, 99455, 99456, 99483	G0402, G0438, G0439, G0463, T1015	
Non-acute Inpatient	99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337		
Remote Blood Pressure Monitoring	93784, 93788, 93790, 99091, 99453, 99454, 99457		8480-6, 8462-4

## Code to Identify Hypertension

**ICD-10-CM**

I10

### Codes to Identify Encounters with a Diagnosis of Diabetes

Description	CPT	HCPS	ICD-10-CM	UBREV	UBTOB
Outpatient Visit	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, 99429, 99455, 99456, 99483	G0402, G0438, G0439, G0463, T1015		510, 511, 512, 513, 514, 515, 516, 517, 519, 520, 521, 522, 523, 526, 527, 528, 529, 982, 983	
Observation Visit	99217, 99218, 99219, 99220				
ED Visit	99281, 99282, 99283, 99284, 99285			450, 451, 452, 456, 459, 981	
Non-Acute Inpatient Stay				22, 24, 118, 128, 138, 148, 158, 190, 191, 192, 193, 194, 199, 524, 525, 550, 551, 552, 559, 660, 661, 662, 663, 669, 1000, 1001, 1002	180, 181, 182, 183, 184, 185, 187, 188, 210, 211, 212, 213, 214, 215, 217, 218, 220, 221, 222, 223, 224, 225, 227, 228, 280, 281, 282, 283, 284, 285, 287, 288, 289, 650, 652, 653, 654, 655, 657, 658, 660, 662, 663, 664, 665, 667, 668, 860, 862, 863, 864, 865, 867, 868, 018F, 018G, 018H, 018I, 018J, 018K, 018M, 018O, 018X, 018Y, 018Z, 021F, 021G, 021H, 021I, 021J, 021K, 021M, 021O, 021X, 021Y, 021Z, 022F, 022G, 022H, 022I, 022J, 022K, 022M, 022O, 022X, 022Y, 022Z, 028F, 028G, 028H, 028I, 028J, 028K, 028M,

Description	CPT	HCPS	ICD-10-CM	UBREV	UBTOB
					028O, 028X, 028Y, 028Z, 065F, 065G, 065H, 065I, 065J, 065K, 065M, 065O, 065X, 065Y, 065Z, 066F, 066G, 066H, 066I, 066J, 066K, 066M, 066O, 066X, 066Y, 066Z, 086F, 086G, 086H, 086I, 086J, 086K, 086M, 086O, 086X, 086Y, 086Z
Acute Inpatient Stay	99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255, 99291				

### Diabetes Medication List

#### Alpha-Glucosidase Inhibitors

- |            |            |
|------------|------------|
| • Acarbose | • Miglitol |
|------------|------------|

#### Amylin Analogs

- |               |
|---------------|
| • Pramlintide |
|---------------|

#### Antidiabetic Combinations

- |   |  |   |
|---|--|---|
| • Alogliptin-Metformin<br>• Alogliptin-Pioglitazone<br>• Canagliflozin-Metformin<br>• Dapagliflozin-Metformin<br>• Empagliflozin-Linagliptin<br>• Empagliflozin-Metformin | • Glimepiride-Pioglitazone<br>• Glimepiride-Rosiglitazone<br>• Glipizide-Metformin<br>• Glyburide-Metformin<br>• Linagliptin-Metformin<br>• Metformin-Pioglitazone | • Metformin-Repaglinide<br>• Metformin-Rosiglitazone<br>• Metformin-Saxagliptin<br>• Metformin-Sitagliptin<br>• Sitagliptin-Simvastatin |
|---|--|---|

#### Insulin

- |  |   |   |
|--|---|---|
| • Insulin Aspart<br>• Insulin Aspart-Insulin Aspart Protamine<br>• Insulin Degludec<br>• Insulin Detemir | • Insulin Glargine<br>• Insulin Glulisine<br>• Insulin Isophane Human<br>• Insulin Isophane-Insulin Regular | • Insulin Lispro<br>• Insulin Lispro-Insulin lispro Protamine<br>• Insulin Regular Human<br>• Insulin Human Inhaled |
|--|---|---|

#### Meglitinides

- |               |               |
|---------------|---------------|
| • Nateglinide | • Repaglinide |
|---------------|---------------|

#### Glucagon-Like Peptide-1 (GLP1) Agonists

- |               |             |               |               |
|---------------|-------------|---------------|---------------|
| • Dulaglutide | • Exenatide | • Liraglutide | • Albiglutide |
|---------------|-------------|---------------|---------------|

#### Sodium Glucose Cotransporter 2 (SGLT2) Inhibitor

- |                 |                 |                 |
|-----------------|-----------------|-----------------|
| • Canagliflozin | • Dapagliflozin | • Empagliflozin |
|-----------------|-----------------|-----------------|

#### Sulfonylureas

- |                                   |                            |                               |
|-----------------------------------|----------------------------|-------------------------------|
| • Chlorpropamide<br>• Glimepiride | • Glipizide<br>• Glyburide | • Tolazamide<br>• Tolbutamide |
|-----------------------------------|----------------------------|-------------------------------|

#### Thiazolidinediones

- |                |                 |
|----------------|-----------------|
| • Pioglitazone | • Rosiglitazone |
|----------------|-----------------|

#### Dipeptidyl Peptidase-4 (DDP-4) Inhibitors

- |              |               |               |               |
|--------------|---------------|---------------|---------------|
| • Alogliptin | • Linagliptin | • Saxagliptin | • Sitagliptin |
|--------------|---------------|---------------|---------------|

## Codes to Identify Diabetes Exclusions

### ICD-10-CM

E10.10, E10.11, E10.21, E10.22, E10.29, E10.311, E10.319, E10.321, E10.3211, E10.3212, E10.3213, E10.3219, E10.329, E10.3291, E10.3292, E10.3293, E10.3299, E10.331, E10.3311, E10.3312, E10.3313, E10.3319, E10.339, E10.3391, E10.3392, E10.3393, E10.3399, E10.341, E10.3411, E10.3412, E10.3413, E10.3419, E10.349, E10.3491, E10.3492, E10.3493, E10.3499, E10.351, E10.3511, E10.3512, E10.3513, E10.3519, E10.3521, E10.3522, E10.3523, E10.3529, E10.3531, E10.3532, E10.3533, E10.3539, E10.3541, E10.3542, E10.3543, E10.3549, E10.3551, E10.3552, E10.3553, E10.3559, E10.359, E10.3591, E10.3592, E10.3593, E10.3599, E10.36, E10.37X1, E10.37X2, E10.37X3, E10.37X9, E10.39, E10.40, E10.41, E10.42, E10.43, E10.44, E10.49, E10.51, E10.52, E10.59, E10.610, E10.618, E10.620, E10.621, E10.622, E10.628, E10.630, E10.638, E10.641, E10.649, E10.65, E10.69, E10.8, E10.9, E11.00, E11.01, E11.10, E11.11, E11.21, E11.22, E11.29, E11.311, E11.319, E11.321, E11.3211, E11.3212, E11.3213, E11.3219, E11.329, E11.3291, E11.3292, E11.3293, E11.3299, E11.331, E11.3311, E11.3312, E11.3313, E11.3319, E11.339, E11.3391, E11.3392, E11.3393, E11.3399, E11.341, E11.3411, E11.3412, E11.3413, E11.3419, E11.349, E11.3491, E11.3492, E11.3493, E11.3499, E11.351, E11.3511, E11.3512, E11.3513, E11.3519, E11.3521, E11.3522, E11.3523, E11.3529, E11.3531, E11.3532, E11.3533, E11.3539, E11.3541, E11.3542, E11.3543, E11.3549, E11.3551, E11.3552, E11.3553, E11.3559, E11.359, E11.3591, E11.3592, E11.3593, E11.3599, E11.36, E11.37X1, E11.37X2, E11.37X3, E11.37X9, E11.39, E11.40, E11.41, E11.42, E11.43, E11.44, E11.49, E11.51, E11.52, E11.59, E11.610, E11.618, E11.620, E11.621, E11.622, E11.628, E11.630, E11.638, E11.641, E11.649, E11.65, E11.69, E11.8, E11.9, E13.00, E13.01, E13.10, E13.11, E13.21, E13.22, E13.29, E13.311, E13.319, E13.321, E13.3211, E13.3212, E13.3213, E13.3219, E13.329, E13.3291, E13.3292, E13.3293, E13.3299, E13.331, E13.3311, E13.3312, E13.3313, E13.3319, E13.339, E13.3391, E13.3392, E13.3393, E13.3399, E13.341, E13.3411, E13.3412, E13.3413, E13.3419, E13.349, E13.3491, E13.3492, E13.3493, E13.3499, E13.351, E13.3511, E13.3512, E13.3513, E13.3519, E13.3521, E13.3522, E13.3523, E13.3529, E13.3531, E13.3532, E13.3533, E13.3539, E13.3541, E13.3542, E13.3543, E13.3549, E13.3551, E13.3552, E13.3553, E13.3559, E13.359, E13.3591, E13.3592, E13.3593, E13.3599, E13.36, E13.37X1, E13.37X2, E13.37X3, E13.37X9, E13.39, E13.40, E13.41, E13.42, E13.43, E13.44, E13.49, E13.51, E13.52, E13.59, E13.610, E13.618, E13.620, E13.621, E13.622, E13.628, E13.630, E13.638, E13.641, E13.649, E13.65, E13.69, E13.8, E13.9, O24.011, O24.012, O24.013, O24.019, O24.02, O24.03, O24.111, O24.112, O24.113, O24.119, O24.12, O24.13, O24.311, O24.312, O24.313, O24.319, O24.32, O24.33, O24.811, O24.812, O24.813, O24.819, O24.82, O24.83, E08.00, E08.01, E08.10, E08.11, E08.21, E08.22, E08.29, E08.311, E08.319, E08.321, E08.3211, E08.3212, E08.3213, E08.3219, E08.329, E08.3291, E08.3292, E08.3293, E08.3299, E08.331, E08.3311, E08.3312, E08.3313, E08.3319, E08.339, E08.3391, E08.3392, E08.3393, E08.3399, E08.341, E08.3411, E08.3412, E08.3413, E08.3419, E08.349, E08.3491, E08.3492, E08.3493, E08.3499, E08.351, E08.3511, E08.3512, E08.3513, E08.3519, E08.3521, E08.3522, E08.3523, E08.3529, E08.3531, E08.3532, E08.3533, E08.3539, E08.3541, E08.3542, E08.3543, E08.3549, E08.3551, E08.3552, E08.3553, E08.3559, E08.359, E08.3591, E08.3592, E08.3593, E08.3599, E08.36, E08.37X1, E08.37X2, E08.37X3, E08.37X9, E08.39, E08.40, E08.41, E08.42, E08.43, E08.44, E08.49, E08.51, E08.52, E08.59, E08.610, E08.618, E08.620, E08.621, E08.622, E08.628, E08.630, E08.638, E08.641, E08.649, E08.65, E08.69, E08.8, E08.9, E09.00, E09.01, E09.10, E09.11, E09.21, E09.22, E09.29, E09.311, E09.319, E09.321, E09.3211, E09.3212, E09.3213, E09.3219, E09.329, E09.3291, E09.3292, E09.3293, E09.3299, E09.331, E09.3311, E09.3312, E09.3313, E09.3319, E09.339, E09.3391, E09.3392, E09.3393, E09.3399, E09.341, E09.3411, E09.3412, E09.3413, E09.3419, E09.349, E09.3491, E09.3492, E09.3493, E09.3499, E09.351, E09.3511, E09.3512, E09.3513, E09.3519, E09.3521, E09.3522, E09.3523, E09.3529, E09.3531, E09.3532, E09.3533, E09.3539, E09.3541, E09.3542, E09.3543, E09.3549, E09.3551, E09.3552, E09.3553, E09.3559, E09.359, E09.3591, E09.3592, E09.3593, E09.3599, E09.36, E09.37X1, E09.37X2, E09.37X3, E09.37X9, E09.39, E09.40, E09.41, E09.42, E09.43, E09.44, E09.49, E09.51, E09.52, E09.59, E09.610, E09.618, E09.620, E09.621, E09.622, E09.628, E09.630, E09.638, E09.641, E09.649, E09.65, E09.69, E09.8, E09.9, O24.410, O24.414, O24.415, O24.419, O24.420, O24.424, O24.425, O24.429, O24.430, O24.434, O24.435, O24.439, O24.911, O24.912, O24.913, O24.919, O24.92, O24.93

**Codes to Identify Exclusions from ADHD Follow-Up Treatment due to an Acute Inpatient Stay with Mental Health Diagnosis or Chemical Dependency Diagnosis**

Description	CPT
Acute Inpatient Stay	99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255, 99291
Description	ICD-10-CM
Mental Health Diagnosis	F03.90, F03.91, 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, F40.00, F40.01, F40.02, F40.10, F40.11, F40.210, F40.218, F40.220, F40.228, F40.230, F40.231, F40.232, F40.233, F40.240, F40.241, F40.242, F40.243, F40.248, F40.290, F40.291, F40.298, F40.8, F40.9, F41.0, F41.1, F41.3, F41.8, F41.9, 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, F44.0, F44.1, F44.2, F44.4, F44.5, F44.6, F44.7, F44.81, F44.89, F44.9, F45.0, F45.1, F45.20, F45.21, F45.22, F45.29, F45.41, F45.42, F45.8, F45.9, F48.1, F48.2, F48.8, F48.9, F50.00, F50.01, F50.02, F50.2, F50.8, F50.81, F50.82, F50.89, F50.9, F51.01, F51.02, F51.03, F51.04, F51.05, F51.09, F51.11, F51.12, F51.13, F51.19, F51.3, F51.4, F51.5, F51.8, F51.9, F52.0, F52.1, F52.21, F52.22, F52.31, F52.32, F52.4, F52.5, F52.6, F52.8, F52.9, F53, F53.0, F53.1, F59, 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, F64.0, F64.1, F64.2, F64.8, F64.9, F65.0, F65.1, F65.2, F65.3, F65.4, F65.50, F65.51, F65.52, F65.81, F65.89, F65.9, F66, F68.10, F68.11, F68.12, F68.13, F68.8, F68.A, F69, F80.0, F80.1, F80.2, F80.4, F80.81, F80.82, F80.89, F80.9, F81.0, F81.2, F81.81, F81.89, F81.9, F82, F84.0, F84.2, F84.3, F84.5, F84.8, F84.9, F88, F89, 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, F95.0, F95.1, F95.2, F95.8, F95.9, F98.0, F98.1, F98.21, F98.29, F98.3, F98.4, F98.5, F98.8, F98.9, F99

**Codes to Identify Criteria for Initiation and Continuation Phase of ADHD Follow-Up Treatment**

Description	CPT	HCPCS	POS	UBREV
ADD Visits	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, 96150, 96151, 96152, 96153, 96154, 99217, 99218, 99219, 99220, 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232,	G0155, G0176, G0177, G0409, G0410, G0411, G0463, H0002, H0004, H0031, H0034, H0035, H0036, H0037, H0039, H0040, H2000, H2001, H2010, H2011, H2012, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, M0064, S0201, S9480, S9484, S9485, T1015	3, 5, 7, 9, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 52, 53, 71, 72	510, 513, 515, 516, 517, 519, 520, 521, 522, 523, 526, 527, 528, 529, 900, 902, 903, 904, 905, 907, 911, 912, 913, 914, 915, 916, 917, 919, 982, 983

Description	CPT	HCPCS	POS	UBREV
	99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255			
Telephone Visits	98966, 98967, 98968, 99441, 99442, 99443			
Telehealth POS			2	

**Codes to Identify Pharmacotherapy Management for COPD Exacerbation - ED visits resulting in an Inpatient Stay are excluded, but Inpatient Stay discharges with a principal diagnosis of COPD, Emphysema, or Chronic Bronchitis qualify**

Description	CPT	UBREV
ED Visit	99281, 99282, 99283, 99284, 99285	450, 451, 452, 456, 459, 981
Inpatient Stay		100, 101, 110, 111, 112, 113, 114, 116, 117, 118, 119, 120, 121, 122, 123, 124, 126, 127, 128, 129, 130, 131, 132, 133, 134, 136, 137, 138, 139, 140, 141, 142, 143, 144, 146, 147, 148, 149, 150, 151, 152, 153, 154, 156, 157, 158, 159, 160, 164, 167, 169, 170, 171, 172, 173, 174, 179, 190, 191, 192, 193, 194, 199, 200, 201, 202, 203, 204, 206, 207, 208, 209, 210, 211, 212, 213, 214, 219, 1000, 1001, 1002

**Diagnosis Codes to Identify Pharmacotherapy Management for COPD Exacerbation**

Description		ICD-10-CM
COPD	J44.0, J44.1, J44.9	
Emphysema	J43.0, J43.1, J43.2, J43.8, J43.9,	
Chronic Bronchitis	J41.0, J41.1, J41.8, J42	

**Codes to Identify Exclusions from Pharmacotherapy Management for COPD Exacerbation**

Description	UBREV	UBTOB
Non-Acute Inpatient Stay	22, 24, 118, 128, 138, 148, 158, 190, 191, 192, 193, 194, 199, 524, 525, 550, 551, 552, 559, 660, 661, 662, 663, 669, 1000, 1001, 1002	180, 181, 182, 183, 184, 185, 187, 188, 210, 211, 212, 213, 214, 215, 217, 218, 220, 221, 222, 223, 224, 225, 227, 228, 280, 281, 282, 283, 284, 285, 287, 288, 289, 650, 652, 653, 654, 655, 657, 658, 660, 662, 663, 664, 665, 667, 668, 860, 862, 863, 864, 865, 867, 868, 018F, 018G, 018H, 018I, 018J, 018K, 018M, 018O, 018X, 018Y, 018Z, 021F, 021G, 021H, 021I, 021J, 021K, 021M, 021O, 021X, 021Y, 021Z, 022F, 022G, 022H, 022I, 022J, 022K, 022M, 022O, 022X, 022Y, 022Z, 028F, 028G, 028H, 028I, 028J, 028K, 028M, 028O, 028X, 028Y, 028Z, 065F, 065G, 065H, 065I, 065J, 065K, 065M, 065O, 065X, 065Y, 065Z, 066F, 066G, 066H, 066I, 066J, 066K, 066M, 066O, 066X, 066Y, 066Z, 086F, 086G, 086H, 086I, 086J, 086K, 086M, 086O, 086X, 086Y, 086Z

### Systemic Corticosteroid Medications List

Glucocorticoids		
• Dexamethasone • Hydrocortisone	• Methylprednisolone • Prednisolone	• Prednisone • Cortisone-Acetate

## Bronchodilator Medications List

Anticholinergic Agents		
<ul style="list-style-type: none"> <li>Albuterol-Ipratropium</li> <li>Aclidinium-Bromide</li> </ul>	<ul style="list-style-type: none"> <li>Ipratropium</li> <li>Tiotropium</li> </ul>	<ul style="list-style-type: none"> <li>Umeclidinium</li> </ul>
Beta 2-Agonists		
<ul style="list-style-type: none"> <li>Albuterol</li> <li>Arformoterol</li> <li>Budesonide-Formoterol</li> <li>Fluticasone-Salmeterol</li> <li>Fluticasone-Vilanterol</li> <li>Formoterol</li> </ul>	<ul style="list-style-type: none"> <li>Formoterol-Glycopyrrolate</li> <li>Indacaterol</li> <li>Indacaterol-Glycopyrrolate</li> <li>Levalbuterol</li> <li>Mometasone-Formoterol</li> <li>Metaproterenol</li> </ul>	<ul style="list-style-type: none"> <li>Olodaterol Hydrochloride</li> <li>Olodaterol-Tiotropium</li> <li>Salmeterol</li> <li>Umeclidinium-Vilanterol</li> </ul>
Antiasthmatics Combinations		
<ul style="list-style-type: none"> <li>Diphenhydramine-Guaifenesin</li> </ul>		

## Codes to Identify Visits with Low Back Pain Diagnosis

Description	CPT	HCPS	ICD-10-CM	UBREV
Outpatient Visit	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, 99429, 99455, 99456, 99483	G0402, G0438, G0439, G0463, T1015		510, 511, 512, 513, 514, 515, 516, 517, 519, 520, 521, 522, 523, 526, 527, 528, 529, 982, 983
Telehealth Modifier	95, GT			
Observation Visit	99217, 99218, 99219, 99220			
ED Visit	99281, 99282, 99283, 99284, 99285			450, 451, 452, 456, 459, 981
Osteopathic and Chiropractic Manipulative Treatment	98925, 98926, 98927, 98928, 98929, 98940, 98941, 98942			
Physical Therapy	97110, 97112, 97113, 97124, 97140, 97161, 97162, 97163, 97164			
Telephone Visits	98966, 98967, 98968, 99441, 99442, 99443			
Online Assessments	98969, 99444			
Imaging Study	72020, 72052, 72100, 72110, 72114, 72120, 72131, 72132, 72133, 72141, 72142, 72146, 72147, 72148, 72149, 72156, 72158, 72200, 72202, 72220			

## Diagnosis Codes for Identifying Uncomplicated Low Back Pain

ICD-10-CM	CPT
M47.26, M47.27, M47.28, M47.816, M47.817, M47.818, M47.896, M47.897, M47.898, M48.06, M48.061, M48.062, M48.07, M48.08, M51.16, M51.17, M51.26, M51.27, M51.36, M51.37, M51.86, M51.87, M53.2X6, M53.2X7, M53.2X8, M53.3, M53.86, M53.87, M53.88, M54.16, M54.17, M54.18, M54.30, M54.31, M54.32,	72020, 72052, 72100, 72110, 72114, 72120, 72131, 72132, 72133, 72141, 72142, 72146, 72147, 72148, 72149, 72156, 72158, 72200, 72202, 72220

M54.40, M54.41, M54.42, M54.5, M54.89, M54.9, M99.03, M99.04, M99.23, M99.33, M99.43, M99.53, M99.63, M99.73, M99.83, M99.84, S33.100A, S33.100D, S33.100S, S33.110A, S33.110D, S33.110S, S33.120A, S33.120D, S33.120S, S33.130A, S33.130D, S33.130S, S33.140A, S33.140D, S33.140S, S33.5XXA, S33.6XXA, S33.8XXA, S33.9XXA, S39.002A, S39.002D, S39.002S, S39.012A, S39.012D, S39.012S, S39.092A, S39.092D, S39.092S, S39.82XA, S39.82XD, S39.82XS, S39.92XA, S39.92XD, S39.92XS	
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### Codes to Identify Exclusions from Imaging Studies for Low Back Pain

Description	ICD-10-CM
Malignant Neoplasms	C00.0, C00.1, C00.2, C00.3, C00.4, C00.5, C00.6, C00.8, C00.9, C01, C02.0, C02.1, C02.2, C02.3, C02.4, C02.8, C02.9, C03.0, C03.1, C03.9, C04.0, C04.1, C04.8, C04.9, C05.0, C05.1, C05.2, C05.8, C05.9, C06.0, C06.1, C06.2, C06.80, C06.89, C06.9, C07, C08.0, C08.1, C08.9, C09.0, C09.1, C09.8, C09.9, C10.0, C10.1, C10.2, C10.3, C10.4, C10.8, C10.9, C11.0, C11.1, C11.2, C11.3, C11.8, C11.9, C12, C13.0, C13.1, C13.2, C13.8, C13.9, C14.0, C14.2, C14.8, C15.3, C15.4, C15.5, C15.8, C15.9, C16.0, C16.1, C16.2, C16.3, C16.4, C16.5, C16.6, C16.8, C16.9, C17.0, C17.1, C17.2, C17.3, C17.8, C17.9, C18.0, C18.1, C18.2, C18.3, C18.4, C18.5, C18.6, C18.7, C18.8, C18.9, C19, C20, C21.0, C21.1, C21.2, C21.8, C22.0, C22.1, C22.2, C22.3, C22.4, C22.7, C22.8, C22.9, C23, C24.0, C24.1, C24.8, C24.9, C25.0, C25.1, C25.2, C25.3, C25.4, C25.7, C25.8, C25.9, C26.0, C26.1, C26.9, C30.0, C30.1, C31.0, C31.1, C31.2, C31.3, C31.8, C31.9, C32.0, C32.1, C32.2, C32.3, C32.8, C32.9, C33, C34.00, C34.01, C34.02, C34.10, C34.11, C34.12, C34.2, C34.30, C34.31, C34.32, C34.80, C34.81, C34.82, C34.90, C34.91, C34.92, C37, C38.0, C38.1, C38.2, C38.3, C38.4, C38.8, C39.0, C39.9, C40.00, C40.01, C40.02, C40.10, C40.11, C40.12, C40.20, C40.21, C40.22, C40.30, C40.31, C40.32, C40.80, C40.81, C40.82, C40.90, C40.91, C40.92, C41.0, C41.1, C41.2, C41.3, C41.4, C41.9, C43.0, C43.10, C43.11, C43.111, C43.112, C43.12, C43.121, C43.122, C43.20, C43.21, C43.22, C43.30, C43.31, C43.39, C43.4, C43.51, C43.52, C43.59, C43.60, C43.61, C43.62, C43.70, C43.71, C43.72, C43.8, C43.9, C45.0, C45.1, C45.2, C45.7, C45.9, C46.0, C46.1, C46.2, C46.3, C46.4, C46.50, C46.51, C46.52, C46.7, C46.9, C47.0, C47.10, C47.11, C47.12, C47.20, C47.21, C47.22, C47.3, C47.4, C47.5, C47.6, C47.8, C47.9, C48.0, C48.1, C48.2, C48.8, C49.0, C49.10, C49.11, C49.12, C49.20, C49.21, C49.22, C49.3, C49.4, C49.5, C49.6, C49.8, C49.9, C49.A0, C49.A1, C49.A2, C49.A3, C49.A4, C49.A5, C49.A9, C4A.0, C4A.10, C4A.11, C4A.111, C4A.112, C4A.12, C4A.121, C4A.122, C4A.20, C4A.21, C4A.22, C4A.30, C4A.31, C4A.39, C4A.4, C4A.51, C4A.52, C4A.59, C4A.60, C4A.61, C4A.62, C4A.70, C4A.71, C4A.72, C4A.8, C4A.9, C50.011, C50.012, C50.019, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.521, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C51.0, C51.1, C51.2, C51.8, C51.9, C52, C53.0, C53.1, C53.8, C53.9, C54.0, C54.1, C54.2, C54.3, C54.8, C54.9, C55, C56.1, C56.2, C56.9, C57.00, C57.01, C57.02, C57.10, C57.11, C57.12, C57.20, C57.21, C57.22, C57.3, C57.4, C57.7, C57.8, C57.9, C58, C60.0, C60.1, C60.2, C60.8, C60.9, C61, C62.00, C62.01, C62.02, C62.10, C62.11, C62.12, C62.90, C62.91, C62.92, C63.00, C63.01, C63.02, C63.10, C63.11, C63.12, C63.2, C63.7, C63.8, C63.9, C64.1, C64.2, C64.9, C65.1, C65.2, C65.9, C66.1, C66.2, C66.9, C67.0, C67.1, C67.2, C67.3, C67.4, C67.5, C67.6, C67.7, C67.8, C67.9, C68.0, C68.1, C68.8, C68.9, C69.00, C69.01, C69.02, C69.10, C69.11, C69.12, C69.20, C69.21, C69.22, C69.30, C69.31, C69.32, C69.40, C69.41, C69.42, C69.50, C69.51, C69.52, C69.60, C69.61, C69.62, C69.80, C69.81, C69.82, C69.90, C69.91, C69.92, C70.0, C70.1, C70.9, C71.0, C71.1, C71.2, C71.3, C71.4, C71.5, C71.6, C71.7, C71.8, C71.9, C72.0, C72.1, C72.20, C72.21, C72.22, C72.30, C72.31, C72.32, C72.40, C72.41, C72.42, C72.50, C72.59,

Description	ICD-10-CM
	C72.9, C73, C74.00, C74.01, C74.02, C74.10, C74.11, C74.12, C74.90, C74.91, C74.92, C75.0, C75.1, C75.2, C75.3, C75.4, C75.5, C75.8, C75.9, C76.0, C76.1, C76.2, C76.3, C76.40, C76.41, C76.42, C76.50, C76.51, C76.52, C76.8, C77.0, C77.1, C77.2, C77.3, C77.4, C77.5, C77.8, C77.9, C78.00, C78.01, C78.02, C78.1, C78.2, C78.30, C78.39, C78.4, C78.5, C78.6, C78.7, C78.80, C78.89, C79.00, C79.01, C79.02, C79.10, C79.11, C79.19, C79.2, C79.31, C79.32, C79.40, C79.49, C79.51, C79.52, C79.60, C79.61, C79.62, C79.70, C79.71, C79.72, C79.81, C79.82, C79.89, C79.9, C7A.00, C7A.010, C7A.011, C7A.012, C7A.019, C7A.020, C7A.021, C7A.022, C7A.023, C7A.024, C7A.025, C7A.026, C7A.029, C7A.090, C7A.091, C7A.092, C7A.093, C7A.094, C7A.095, C7A.096, C7A.098, C7A.1, C7A.8, C7B.00, C7B.01, C7B.02, C7B.03, C7B.04, C7B.09, C7B.1, C7B.8, C80.0, C80.1, C80.2, C81.00, C81.01, C81.02, C81.03, C81.04, C81.05, C81.06, C81.07, C81.08, C81.09, C81.10, C81.11, C81.12, C81.13, C81.14, C81.15, C81.16, C81.17, C81.18, C81.19, C81.20, C81.21, C81.22, C81.23, C81.24, C81.25, C81.26, C81.27, C81.28, C81.29, C81.30, C81.31, C81.32, C81.33, C81.34, C81.35, C81.36, C81.37, C81.38, C81.39, C81.40, C81.41, C81.42, C81.43, C81.44, C81.45, C81.46, C81.47, C81.48, C81.49, C81.70, C81.71, C81.72, C81.73, C81.74, C81.75, C81.76, C81.77, C81.78, C81.79, C81.90, C81.91, C81.92, C81.93, C81.94, C81.95, C81.96, C81.97, C81.98, C81.99, C82.00, C82.01, C82.02, C82.03, C82.04, C82.05, C82.06, C82.07, C82.08, C82.09, C82.10, C82.11, C82.12, C82.13, C82.14, C82.15, C82.16, C82.17, C82.18, C82.19, C82.20, C82.21, C82.22, C82.23, C82.24, C82.25, C82.26, C82.27, C82.28, C82.29, C82.30, C82.31, C82.32, C82.33, C82.34, C82.35, C82.36, C82.37, C82.38, C82.39, C82.40, C82.41, C82.42, C82.43, C82.44, C82.45, C82.46, C82.47, C82.48, C82.49, C82.50, C82.51, C82.52, C82.53, C82.54, C82.55, C82.56, C82.57, C82.58, C82.59, C82.60, C82.61, C82.62, C82.63, C82.64, C82.65, C82.66, C82.67, C82.68, C82.69, C82.80, C82.81, C82.82, C82.83, C82.84, C82.85, C82.86, C82.87, C82.88, C82.89, C82.90, C82.91, C82.92, C82.93, C82.94, C82.95, C82.96, C82.97, C82.98, C82.99, C83.00, C83.01, C83.02, C83.03, C83.04, C83.05, C83.06, C83.07, C83.08, C83.09, C83.10, C83.11, C83.12, C83.13, C83.14, C83.15, C83.16, C83.17, C83.18, C83.19, C83.30, C83.31, C83.32, C83.33, C83.34, C83.35, C83.36, C83.37, C83.38, C83.39, C83.50, C83.51, C83.52, C83.53, C83.54, C83.55, C83.56, C83.57, C83.58, C83.59, C83.70, C83.71, C83.72, C83.73, C83.74, C83.75, C83.76, C83.77, C83.78, C83.79, C83.80, C83.81, C83.82, C83.83, C83.84, C83.85, C83.86, C83.87, C83.88, C83.89, C83.90, C83.91, C83.92, C83.93, C83.94, C83.95, C83.96, C83.97, C83.98, C83.99, C84.00, C84.01, C84.02, C84.03, C84.04, C84.05, C84.06, C84.07, C84.08, C84.09, C84.10, C84.11, C84.12, C84.13, C84.14, C84.15, C84.16, C84.17, C84.18, C84.19, C84.40, C84.41, C84.42, C84.43, C84.44, C84.45, C84.46, C84.47, C84.48, C84.49, C84.60, C84.61, C84.62, C84.63, C84.64, C84.65, C84.66, C84.67, C84.68, C84.69, C84.70, C84.71, C84.72, C84.73, C84.74, C84.75, C84.76, C84.77, C84.78, C84.79, C84.90, C84.91, C84.92, C84.93, C84.94, C84.95, C84.96, C84.97, C84.98, C84.99, C84.A0, C84.A1, C84.A2, C84.A3, C84.A4, C84.A5, C84.A6, C84.A7, C84.A8, C84.A9, C84.Z0, C84.Z1, C84.Z2, C84.Z3, C84.Z4, C84.Z5, C84.Z6, C84.Z7, C84.Z8, C84.Z9, C85.10, C85.11, C85.12, C85.13, C85.14, C85.15, C85.16, C85.17, C85.18, C85.19, C85.20, C85.21, C85.22, C85.23, C85.24, C85.25, C85.26, C85.27, C85.28, C85.29, C85.80, C85.81, C85.82, C85.83, C85.84, C85.85, C85.86, C85.87, C85.88, C85.89, C85.90, C85.91, C85.92, C85.93, C85.94, C85.95, C85.96, C85.97, C85.98, C85.99, C86.0, C86.1, C86.2, C86.3, C86.4, C86.5, C86.6, C88.0, C88.2, C88.3, C88.4, C88.8, C88.9, C90.00, C90.01, C90.02, C90.10, C90.11, C90.12, C90.20, C90.21, C90.22, C90.30, C90.31, C90.32, C91.00, C91.01, C91.02, C91.10, C91.11, C91.12, C91.30, C91.31, C91.32, C91.40, C91.41, C91.42, C91.50, C91.51, C91.52, C91.60, C91.61, C91.62, C91.90, C91.91, C91.92, C91.A0, C91.A1, C91.A2, C91.Z0, C91.Z1, C91.Z2, C92.00, C92.01, C92.02, C92.10, C92.11, C92.12, C92.20, C92.21, C92.22, C92.30, C92.31, C92.32, C92.40, C92.41, C92.42, C92.50, C92.51, C92.52, C92.60, C92.61, C92.62, C92.90, C92.91, C92.92, C92.A0, C92.A1, C92.A2, C92.Z0, C92.Z1, C92.Z2, C93.00, C93.01, C93.02, C93.10, C93.11, C93.12, C93.30, C93.31, C93.32, C93.90, C93.91, C93.92, C93.Z0, C93.Z1, C93.Z2, C94.00, C94.01, C94.02, C94.20, C94.21, C94.22, C94.30, C94.31, C94.32, C94.40, C94.41, C94.42, C94.6, C94.80, C94.81, C94.82, C95.00, C95.01, C95.02, C95.10, C95.11, C95.12, C95.90, C95.91, C95.92, C96.0, C96.2, C96.20, C96.21, C96.22, C96.29, C96.4, C96.5, C96.6, C96.9, C96.A, C96.Z

Description	ICD-10-CM
Other Neoplasms	D00.00, D00.01, D00.02, D00.03, D00.04, D00.05, D00.06, D00.07, D00.08, D00.1, D00.2, D01.0, D01.1, D01.2, D01.3, D01.40, D01.49, D01.5, D01.7, D01.9, D02.0, D02.1, D02.20, D02.21, D02.22, D02.3, D02.4, D03.0, D03.10, D03.11, D03.111, D03.112, D03.12, D03.121, D03.122, D03.20, D03.21, D03.22, D03.30, D03.39, D03.4, D03.51, D03.52, D03.59, D03.60, D03.61, D03.62, D03.70, D03.71, D03.72, D03.8, D03.9, D04.0, D04.10, D04.11, D04.111, D04.112, D04.12, D04.121, D04.122, D04.20, D04.21, D04.22, D04.30, D04.39, D04.4, D04.5, D04.60, D04.61, D04.62, D04.70, D04.71, D04.72, D04.8, D04.9, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D06.0, D06.1, D06.7, D06.9, D07.0, D07.1, D07.2, D07.30, D07.39, D07.4, D07.5, D07.60, D07.61, D07.69, D09.0, D09.10, D09.19, D09.20, D09.21, D09.22, D09.3, D09.8, D09.9, D37.01, D37.02, D37.030, D37.031, D37.032, D37.039, D37.04, D37.05, D37.09, D37.1, D37.2, D37.3, D37.4, D37.5, D37.6, D37.8, D37.9, D38.0, D38.1, D38.2, D38.3, D38.4, D38.5, D38.6, D39.0, D39.10, D39.11, D39.12, D39.2, D39.8, D39.9, D40.0, D40.10, D40.11, D40.12, D40.8, D40.9, D41.00, D41.01, D41.02, D41.10, D41.11, D41.12, D41.20, D41.21, D41.22, D41.3, D41.4, D41.8, D41.9, D42.0, D42.1, D42.9, D43.0, D43.1, D43.2, D43.3, D43.4, D43.8, D43.9, D44.0, D44.10, D44.11, D44.12, D44.2, D44.3, D44.4, D44.5, D44.6, D44.7, D44.9, D45, D46.0, D46.1, D46.20, D46.21, D46.22, D46.4, D46.9, D46.A, D46.B, D46.C, D46.Z, D47.0, D47.01, D47.02, D47.09, D47.1, D47.2, D47.3, D47.4, D47.9, D47.Z1, D47.Z2, D47.Z9, D48.0, D48.1, D48.2, D48.3, D48.4, D48.5, D48.60, D48.61, D48.62, D48.7, D48.9, D49.0, D49.1, D49.2, D49.3, D49.4, D49.5, D49.511, D49.512, D49.519, D49.59, D49.6, D49.7, D49.81, D49.89, D49.9
History of Malignant Neoplasm	Z85.00, Z85.01, Z85.020, Z85.028, Z85.030, Z85.038, Z85.040, Z85.048, Z85.05, Z85.060, Z85.068, Z85.07, Z85.09, Z85.110, Z85.118, Z85.12, Z85.20, Z85.21, Z85.22, Z85.230, Z85.238, Z85.29, Z85.3, Z85.40, Z85.41, Z85.42, Z85.43, Z85.44, Z85.45, Z85.46, Z85.47, Z85.48, Z85.49, Z85.50, Z85.51, Z85.520, Z85.528, Z85.53, Z85.54, Z85.59, Z85.6, Z85.71, Z85.72, Z85.79, Z85.810, Z85.818, Z85.819, Z85.820, Z85.821, Z85.828, Z85.830, Z85.831, Z85.840, Z85.841, Z85.848, Z85.850, Z85.858, Z85.89, Z85.9, Z86.000, Z86.001, Z86.002, Z86.003, Z86.004, Z86.005, Z86.006, Z86.007, Z86.008, Z86.03
Other Malignant Neoplasm of the Skin	C44.00, C44.01, C44.02, C44.09, C44.101, C44.102, C44.1021, C44.1022, C44.109, C44.1091, C44.1092, C44.111, C44.112, C44.1121, C44.1122, C44.119, C44.1191, C44.1192, C44.121, C44.122, C44.1221, C44.1222, C44.129, C44.1291, C44.1292, C44.131, C44.1321, C44.1322, C44.1391, C44.1392, C44.191, C44.192, C44.1921, C44.1922, C44.199, C44.1991, C44.1992, C44.201, C44.202, C44.209, C44.211, C44.212, C44.219, C44.221, C44.222, C44.229, C44.291, C44.292, C44.299, C44.300, C44.301, C44.309, C44.310, C44.311, C44.319, C44.320, C44.321, C44.329, C44.390, C44.391, C44.399, C44.40, C44.41, C44.42, C44.49, C44.500, C44.501, C44.509, C44.510, C44.511, C44.519, C44.520, C44.521, C44.529, C44.590, C44.591, C44.599, C44.601, C44.602, C44.609, C44.611, C44.612, C44.619, C44.621, C44.622, C44.629, C44.691, C44.692, C44.699, C44.701, C44.702, C44.709, C44.711, C44.712, C44.719, C44.721, C44.722, C44.729, C44.791, C44.792, C44.799, C44.80, C44.81, C44.82, C44.89, C44.90, C44.91, C44.92, C44.99
IV Drug Abuse	F11.10, F11.11, F11.120, F11.121, F11.122, F11.129, F11.14, F11.150, F11.151, F11.159, F11.181, F11.182, F11.188, F11.19, F11.20, F11.21, 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, F13.10, F13.11, F13.120, F13.121, F13.129, F13.14, F13.150, F13.151, F13.159, F13.180, F13.181, F13.182, F13.188, F13.19, F13.20, F13.21, 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, F14.11, F14.120, F14.121, F14.122, F14.129, F14.14, F14.150, F14.151, F14.159, F14.180, F14.181, F14.182, F14.188, F14.19, F14.20, F14.21, 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, F15.11, F15.120, F15.121, F15.122, F15.129, F15.14, F15.150, F15.151, F15.159, F15.180, F15.181, F15.182, F15.188, F15.19, F15.20, F15.21, 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

Description		ICD-10-CM			
Neurologic Impairment	G83.4				
HIV	B20, Z21				
Spinal Infection	A17.81, G06.1, M46.25, M46.26, M46.27, M46.28, M46.35, M46.36, M46.37, M46.38, M46.46, M46.47, M46.48				
Description	CPT	HCPCS	ICD10PCS	UBREV	
Organ Transplant	32850, 32851, 32852, 32853, 32854, 32855, 32856, 33927, 33928, 33929, 33930, 33933, 33935, 33940, 33944, 33945, 44132, 44133, 44135, 44136, 44137, 44715, 44720, 44721, 47133, 47135, 47136, 47140, 47141, 47142, 47143, 47144, 47145, 47146, 47147, 48160, 48550, 48551, 48552, 48554, 48556	S2053, S2054, S2055, S2060, S2061, S2152	02YA0Z0, 02YA0Z1, 02YA0Z2, 07YM0Z0, 07YM0Z1, 07YM0Z2, 07YP0Z0, 07YP0Z1, 07YP0Z2, 0BYC0Z0, 0BYC0Z1, 0BYC0Z2, 0BYD0Z0, 0BYD0Z1, 0BYD0Z2, 0BYF0Z0, 0BYF0Z1, 0BYF0Z2, 0BYG0Z0, 0BYG0Z1, 0BYG0Z2, 0BYH0Z0, 0BYH0Z1, 0BYH0Z2, 0BYJ0Z0, 0BYJ0Z1, 0BYJ0Z2, 0BYK0Z0, 0BYK0Z1, 0BYK0Z2, 0BYL0Z0, 0BYL0Z1, 0BYL0Z2, 0BYM0Z0, 0BYM0Z1, 0BYM0Z2, 0DY50Z0, 0DY50Z1, 0DY50Z2, 0DY60Z0, 0DY60Z1, 0DY60Z2, 0DY80Z0, 0DY80Z1, 0DY80Z2, 0DYE0Z0, 0DYE0Z1, 0DYE0Z2, 0FY00Z0, 0FY00Z1, 0FY00Z2, 0FYG0Z0, 0FYG0Z1, 0FYG0Z2, 0UY00Z0, 0UY00Z1, 0UY00Z2, 0UY10Z0, 0UY10Z1, 0UY10Z2, 0UY90Z0, 0UY90Z1, 0UY90Z2, 0WY20Z0, 0WY20Z1, 0XYJ0Z0, 0XYJ0Z1, 0XYK0Z0, 0XYK0Z1, 3E030U1, 3E033U1, 3E0J3U1, 3E0J7U1, 3E0J8U1		
Description	CPT	HCPCS	ICD-10-CM	ICD10PCS	UBREV
Kidney Transplant	50360, 50365, 50380	S2065	Z94.0	0TY00Z0, 0TY00Z1, 0TY00Z2, 0TY10Z0, 0TY10Z1, 0TY10Z2	

\*Trauma anytime during the 3 months prior to the IESD through 28 days after the IESD should be excluded from the measure.

### Corticosteroid Medications List

#### Corticosteroid

- |                  |                |                      |                 |
|------------------|----------------|----------------------|-----------------|
| • Hydrocortisone | • Prednisone   | • Methylprednisolone | • Dexamethasone |
| • Cortisone      | • Prednisolone | • Triamcinolone      | • Betamethasone |

### ACE Inhibitor/ARB Medications List

#### Angiotensin Converting Enzyme Inhibitors

- |              |              |              |               |                |
|--------------|--------------|--------------|---------------|----------------|
| • Benazepril | • Enalapril  | • Lisinopril | • Perindopril | • Ramipril     |
| • Captopril  | • Fosinopril | • Moexipril  | • Quinapril   | • Trandolapril |

#### Angiotensin II Inhibitors

- |               |              |              |               |
|---------------|--------------|--------------|---------------|
| • Azilsartan  | • Eprosartan | • Losartan   | • Telmisartan |
| • Candesartan | • Irbesartan | • Olmesartan | • Valsartan   |

#### Antihypertensive Combinations

<ul style="list-style-type: none"> <li>• Aliskiren-Valsartan</li> <li>• Amlodipine-Benazepril</li> <li>• Amlodipine-Hydrochlorothiazide-Valsartan</li> <li>• Amlodipine-Hydrochlorothiazide-Olmesartan</li> <li>• Amlodipine-Olmesartan</li> <li>• Amlodipine-Perindopril</li> <li>• Amlodipine-Telmisartan</li> </ul>	<ul style="list-style-type: none"> <li>• Amlodipine-Valsartan</li> <li>• Azilsartan-Chlorthalidone</li> <li>• Benazepril-Hydrochlorothiazide</li> <li>• Candesartan-Hydrochlorothiazide</li> <li>• Captopril-Hydrochlorothiazide</li> <li>• Enalapril-Hydrochlorothiazide</li> <li>• Eprosartan-Hydrochlorothiazide</li> <li>• Fosinopril-Hydrochlorothiazide</li> <li>• Hydrochlorothiazide-Irbesartan</li> </ul>	<ul style="list-style-type: none"> <li>• Hydrochlorothiazide-Lisinopril</li> <li>• Hydrochlorothiazide-Losartan</li> <li>• Hydrochlorothiazide-Moexipril</li> <li>• Hydrochlorothiazide-Olmesartan</li> <li>• Hydrochlorothiazide-Quinapril</li> <li>• Hydrochlorothiazide-Telmisartan</li> <li>• Hydrochlorothiazide-Valsartan</li> <li>• Sacubitril-Valsartan</li> <li>• Trandolapril-Verapamil</li> </ul>
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### Codes to Identify Lab Measures for Monitoring of Persistent Medications

Description	CPT	LOINC
Lab Panel	80047, 80048, 80050, 80053, 80069	
Serum Creatinine	82565, 82575	11041-1, 11042-9, 12195-4, 13441-1, 13442-9, 13443-7, 13446-0, 13447-8, 13449-4, 13450-2, 14682-9, 16188-5, 16189-3, 21232-4, 2160-0, 2163-4, 2164-2, 26752-6, 31045-8, 33558-8, 35203-9, 35591-7, 35592-5, 35593-3, 35594-1, 38483-4, 39955-0, 39956-8, 39957-6, 39958-4, 39959-2, 39960-0, 39961-8, 39962-6, 39963-4, 39964-2, 39965-9, 39966-7, 39967-5, 39968-3, 39969-1, 39970-9, 39971-7, 39972-5, 39973-3, 39974-1, 39975-8, 39976-6, 40112-5, 40113-3, 40114-1, 40115-8, 40116-6, 40117-4, 40118-2, 40119-0, 40120-8, 40121-6, 40122-4, 40123-2, 40124-0, 40125-7, 40126-5, 40127-3, 40128-1, 40248-7, 40249-5, 40250-3, 40251-1, 40252-9, 40253-7, 40254-5, 40255-2, 40256-0, 40257-8, 40258-6, 40264-4, 40265-1, 40266-9, 40267-7, 40268-5, 40269-3, 40270-1, 40271-9, 40272-7, 40273-5, 44784-7, 50380-5, 50381-3, 51619-5, 51620-3, 59826-8, 59834-2, 62425-4
Serum Potassium	80051, 84132	12812-4, 12813-2, 2823-3, 2824-1, 29349-8, 32713-0, 39789-3, 39790-1, 41656-0, 51618-7, 6298-4, 75940-7, 82722-0

### Diuretic Medications List

#### Antihypertensive Combinations

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>• Aliskiren-Hydrochlorothiazide</li> <li>• Aliskiren-Hydrochlorothiazide-Amlodipine</li> <li>• Amiloride-Hydrochlorothiazide</li> <li>• Amlodipine-Hydrochlorothiazide-Olmesartan</li> <li>• Amlodipine-Hydrochlorothiazide-Valsartan</li> <li>• Atenolol-Chlorthalidone</li> <li>• Azilsartan-Chlorthalidone</li> <li>• Azilsartan-Chlorthalidone</li> <li>• Benazepril-Hydrochlorothiazide</li> <li>• Bendroflumethiazide-Nadolol</li> <li>• Bisoprolol-Hydrochlorothiazide</li> <li>• Candesartan-Hydrochlorothiazide</li> </ul> | <ul style="list-style-type: none"> <li>• Fosinopril-Hydrochlorothiazide</li> <li>• Hydrochlorothiazide-Irbesartan</li> <li>• Hydrochlorothiazide-Lisinopril</li> <li>• Hydrochlorothiazide-Losartan</li> <li>• Hydrochlorothiazide-Methyldopa</li> <li>• Hydrochlorothiazide-Metoprolol</li> <li>• Hydrochlorothiazide-Moexipril</li> <li>• Hydrochlorothiazide-Olmesartan</li> <li>• Hydrochlorothiazide-Propranolol</li> <li>• Hydrochlorothiazide-Quinapril</li> <li>• Hydrochlorothiazide-Spironolactone</li> <li>• Hydrochlorothiazide-Telmisartan</li> </ul> |
|--|--|

<ul style="list-style-type: none"> <li>Captopril-Hydrochlorothiazide</li> <li>Chlorthalidone-Clonidine</li> <li>Enalapril-Hydrochlorothiazide</li> <li>Eprosartan-Hydrochlorothiazide</li> </ul>	<ul style="list-style-type: none"> <li>Hydrochlorothiazide-Triamterene</li> <li>Hydrochlorothiazide-Valsartan</li> </ul>
<b>Loop Diuretics</b>	
<ul style="list-style-type: none"> <li>Bumetanide</li> <li>Ethacrynic Acid</li> </ul>	<ul style="list-style-type: none"> <li>Furosemide</li> <li>Torsemide</li> </ul>
<b>Potassium-Sparing Diuretics</b>	
<ul style="list-style-type: none"> <li>Amiloride</li> <li>Eplerenone</li> </ul>	<ul style="list-style-type: none"> <li>Spiromolactone</li> <li>Triamterene</li> </ul>
<b>Thiazide Diuretics</b>	
<ul style="list-style-type: none"> <li>Chlorothiazide</li> <li>Chlorthalidone</li> <li>Hydrochlorothiazide</li> </ul>	<ul style="list-style-type: none"> <li>Indapamide</li> <li>Methyclothiazide</li> <li>Metolazone</li> </ul>

### Codes to Identify Exclusion from Monitoring of Persistent Medications

Description	UBREV	UBTOB
Non-Acute Inpatient Stay	22, 24, 118, 128, 138, 148, 158, 190, 191, 192, 193, 194, 199, 524, 525, 550, 551, 552, 559, 660, 661, 662, 663, 669, 1000, 1001, 1002	180, 181, 182, 183, 184, 185, 187, 188, 210, 211, 212, 213, 214, 215, 217, 218, 22, 221, 222, 223, 224, 225, 227, 228, 280, 281, 282, 283, 284, 285, 287, 288, 289, 650, 652, 653, 654, 655, 657, 658, 660, 662, 663, 664, 665, 667, 668, 860, 862, 863, 864, 865, 867, 868, 018F, 018G, 018H, 018I, 018J, 018K, 018M, 018O, 018X, 018Y, 018Z, 021F, 021G, 021H, 021I, 021J, 021K, 021M, 021O, 021X, 021Y, 021Z, 022F, 022G, 022H, 022I, 022J, 022K, 022M, 022O, 022X, 022Y, 022Z, 028F, 028G, 028H, 028I, 028J, 028K, 028M, 028O, 028X, 028Y, 028Z, 065F, 065G, 065H, 065I, 065J, 065K, 065M, 065N, 065O, 065X, 065Y, 065Z, 066F, 066G, 066H, 066I, 066J, 066K, 066M, 066N, 066O, 066X, 066Y, 066Z, 086F, 086G, 086H, 086I, 086J, 086K, 086M, 086N, 086O, 086X, 086Y, 086Z
<b>CPT</b>		
Acute Inpatient Stay	99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255, 99291	100, 101, 110, 111, 112, 113, 114, 119, 120, 121, 122, 123, 124, 129, 130, 131, 132, 133, 134, 139, 140, 141, 142, 143, 144, 149, 150, 151, 152, 153, 154, 159, 160, 164, 167, 169, 200, 201, 202, 203, 204, 206, 207, 208, 209, 210, 211, 212, 213, 214, 219, 720, 721, 722, 723, 724, 729, 987

### Combination Vaccinations for Childhood Immunization Status

Combination	DTaP	IPV	MMR	HiB	HepB	VZV	PCV	HepA	RV	Influenza
Combination 2	✓	✓	✓	✓	✓	✓				
Combination 3	✓	✓	✓	✓	✓	✓	✓			
Combination 4	✓	✓	✓	✓	✓	✓	✓	✓		
Combination 5	✓	✓	✓	✓	✓	✓	✓		✓	
Combination 6	✓	✓	✓	✓	✓	✓	✓			✓
Combination 7	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Combination 8	✓	✓	✓	✓	✓	✓	✓	✓		✓
Combination 9	✓	✓	✓	✓	✓	✓	✓		✓	✓
Combination 10	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

**Codes to Identify Inpatient Stays**

Description	UBREV
Inpatient Stay	100, 101, 110, 111, 112, 113, 114, 116, 117, 118, 119, 120, 121, 122, 123, 124, 126, 127, 128, 129, 130, 131, 132, 133, 134, 136, 137, 138, 139, 140, 141, 142, 143, 144, 146, 147, 148, 149, 150, 151, 152, 153, 154, 156, 157, 158, 159, 160, 164, 167, 169, 170, 171, 172, 173, 174, 179, 190, 191, 192, 193, 194, 199, 200, 201, 202, 203, 204, 206, 207, 208, 209, 210, 211, 212, 213, 214, 219, 1000, 1001, 1002

**Codes to Identify Medication Reconciliation**

CPT	CPT-CAT-II
99495, 99496, 99483	1111F