

HEDIS Coding Tips

The following CPT Category II and ICD-10-CM codes can help reduce the number of medical records we request during HEDIS® medical record review season (January to May each year). Adding these codes to a claim will help us identify additional information about the visit and improve the accuracy of reporting quality measures.¹

Prenatal and postpartum care

Initial prenatal care visit	0500F or 0501F — if <i>Prenatal Care Flow Sheet</i> documented in medical record by first prenatal visit
Subsequent prenatal care visit	0502F
Postpartum care visit	0503F — Make sure it is on or between 21 to 56 days of delivery.

Diabetes care

Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed	2022F
Seven standard field stereoscopic photos with interpretation by an ophthalmologist or optometrist documented and reviewed	2024F
Eye imaging validated to match diagnosis from seven standard field stereoscopic photos results documented and reviewed	2026F
Low risk for retinopathy (no evidence of retinopathy in the prior year)	3072F
HbA1c level less than 7	3044F
HbA1c level equal to 7 to 9	3045F
HbA1c level greater than 9	3046F
Most recent LDL-C less than 100 mg/dL	3048F
Most recent LDL-C equal to 100 to 129 mg/dL	3049F
Most recent LDL-C less than/equal to 130 mg/dL	3050F
Positive microalbuminuria test	3060F
Negative microalbuminuria test	3061F
Positive macroalbuminuria test	3062F
Documentation of treatment for nephropathy (for example, patient receiving dialysis; patient being treated for ESRD, CRF, ARF or renal insufficiency; any visit to a nephrologist)	3066F
Angiotensin converting enzyme inhibitor or angiotensin receptor blocker therapy prescribed or currently being taken (coronary artery disease, chronic kidney disease, heart failure)	4010F

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NYEPEC-1901-19 August 2019

Body mass index (BMI) — adult²

Z68.1 to Z68.45	Refer to ICD-10 description to select the appropriate code.
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BMI — child²

Z68.51 to Z68.54	Refer to ICD-10 description to select the appropriate code.
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Controlling blood pressure

Most recent systolic blood pressure less than 130 mm Hg	3074F
Most recent systolic blood pressure 130 to 139 mm Hg	3075F
Most recent systolic blood pressure greater than/equal to 140 mm Hg	3077F
Most recent diastolic blood pressure less than 80	3078F
Most recent diastolic blood pressure 80 to 89	3079F
Most recent diastolic blood pressure greater than/equal to 90	3080F

1. Multiple dates of service may be associated with a single lab test (for example, a collection date, a reported date and a claim date). For a laboratory test CPT II code to count toward HEDIS, the Category II date of service and the test result date must be no more than seven days apart.

The codes listed are for informational purposes only and are not intended to suggest or guide reimbursement. If applicable, please refer to your provider contract or health plan contact for reimbursement information. For a complete list of CPT Category II codes, please go to the American Medical Association website at: <https://www.ama-assn.org> > Practice Management > CPT® > CPT® coding resources and tools

2. NCQA new guidelines: Provider must submit a claim with a BMI or BMI percentile code only when there is an associated diagnosis (for example, overweight, obesity). Healthy weight is not considered an associated diagnosis.