


COLORECTAL CANCER SCREENING	
COLORECTAL CANCER SCREENING RESULTS DOCUMENTED AND REVIEWED	3017F
EXCLUSIONS	
PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF LARGE INTESTINE	Z85.038
PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF RECTUM, RECTOSIGMOID JUNCTION AND ANUS	Z85.048
CERVICAL CANCER SCREENING	
CERVICAL CANCER SCREENING RESULTS DOCUMENTED AND REVIEWED	3015F
EXCLUSIONS	
<ul style="list-style-type: none"> • DOCUMENTATION OF A "VAGINAL PAP SMEAR" IN CONJUNCTION WITH DOCUMENTATION OF "HYSTERECTOMY." • HYSTERECTOMY IN COMBINATION WITH DOCUMENTATION THAT THE PATIENT NO LONGER NEEDS PAP TESTING OR CERVICAL CANCER SCREENING, OR HAS NO RESIDUAL CERVIX. • TOTAL, COMPLETE OR RADICAL HYSTERECTOMY, CERVICAL AGENESIS OR ACQUIRED ABSENCE OF CERVIX. 	ACQUIRED ABSENCE CERVIX/ UTERUS Z90.71 OR CERVIX ONLY Z90.712
• TRANSGENDER (MALE TO FEMALE) MEMBERS WOULD NEED TO HAVE APPROPRIATE CODING SUBMITTED INDICATING THE ABSENCE OF CERVIX.	GENDER DYSPHORIA F64.0
SOCIAL DETERMINANTS OF HEALTH DIAGNOSIS CODES	
ENCOUNTER FOR SCREENING, UNSPECIFIED	Z13.9
PROBLEMS RELATED TO EDUCATION AND LITERACY	Z55
PROBLEMS RELATED TO EMPLOYMENT AND UNEMPLOYMENT	Z56
OCCUPATIONAL EXPOSURE TO RISK FACTORS	Z57
PROBLEMS RELATED TO HOUSING AND ECONOMIC CIRCUMSTANCES	Z59
PROBLEMS RELATED TO SOCIAL ENVIRONMENT	Z60
PROBLEMS RELATED TO UPBRINGING	Z62
OTHER PROBLEMS RELATED TO PRIMARY SUPPORT GROUP, INCLUDING FAMILY CIRCUMSTANCES	Z63
PROBLEMS RELATED TO CERTAIN PSYCHOSOCIAL CIRCUMSTANCES (PREGNANCY, MULTIPARITY, DISCORD WITH COUNSELORS)	Z64
PROBLEMS RELATED TO OTHER PSYCHOSOCIAL CIRCUMSTANCES (CONVICTION, IMPRISONMENT, RELEASE, LEGAL DIFFICULTIES, VICTIM OF CRIME AND TERRORISM, EXPOSURE TO DISASTER, WAR, OTHER HOSTILITIES	Z65

MEDICATION RECONCILIATION	
MEDICATION RECONCILIATION. CAN BE BILLED ALONE SINCE A FACE-TO-FACE IS NOT REQUIRED. CANNOT BE BILLED WITH A TRANSITIONAL CARE MANAGEMENT CODE	1111F
FALL RISK ASSESSMENT	
FALLS PLAN OF CARE DOCUMENTED	0518F
PATIENT SCREENED FOR FALL RISK: 2 OR MORE FALLS IN LAST YEAR OR FALL WITH INJURY IN LAST YEAR	1100F
PATIENT SCREENED FOR FALL RISK: NO FALLS IN LAST YEAR OR 1 FALL WITH NO INJURY IN LAST YEAR	1101F
CARE FOR OLDER ADULTS	
ADVANCE CARE PLAN OR SIMILAR LEGAL DOCUMENT PRESENT IN THE MEDICAL RECORD	1157F
ADVANCE CARE PLANNING DISCUSSION DOCUMENTED IN THE MEDICAL RECORD	1158F
ADVANCE CARE PLANNING DISCUSSED AND DOCUMENTED; ADVANCE CARE PLAN OR SURROGATE DECISION MAKER DOCUMENTED IN THE MEDICAL RECORD	1123F
REVIEW OF ALL MEDICATIONS BY A PRESCRIBING PRACTITIONER OR CLINICAL PHARMACIST (SUCH AS, PRESCRIPTIONS, OTCS, HERBAL THERAPIES AND SUPPLEMENTS) DOCUMENTED IN THE MEDICAL RECORD	1160F
FUNCTIONAL STATUS ASSESSED	1170F
PLAN OF CARE TO ADDRESS PAIN DOCUMENTED	0521F
PAIN SEVERITY QUANTIFIED; PAIN PRESENT	1125F
PAIN SEVERITY QUANTIFIED; NO PAIN PRESENT	1126F
ADVANCED ILLNESS AND FRAILITY CODES	
For a complete list of codes that meet the exclusion for advanced illness and frailty, please use this link:	
	
iPhone: open camera and hover Android: use QR code reader appA241:C259	

Quality Performance CPT II Coding

DIABETIC MEASURES	
HbA1c LEVELS	
HGB A1C level <7.0%	3044F
HGB A1C level 7.0 - < 8.0%	3051F
HGB A1C level 8.0 ≤ 9.0%	3052F
HGB A1C level > 9.0%	3046F
Lipid Levels	
LDL-C < 100 mg/dl	3048F
LDL-C 100-129 mg/dl	3049F
LDL-C ≥ 130 mg/dl	3050F
EXCLUSIONS	
PATIENTS WITH INTOLERANCE TO STATINS ARE EXCLUDED FROM THE MEASURE. DOCUMENT THEIR CONDITION IN THE MEDICAL RECORD AND SUBMIT A CLAIM USING THE APPROPRIATE ICD10 CODE	
MYALGIA	M79.1
MYOSITIS UNSPECIFIED	M60.9
OTHER MYOSITIS UNSPECIFIED SITE	M60.80
RHABDOMYOLYSIS	M62.82
ESRD DURING MEASUREMENT YEAR OR THE YEAR PRIOR	N18.6
LIVER DISEASE	K70-K77
PRE-DIABETES	R73.03, R73.09
POLYCYSTIC OVARY SYNDROME	E28.2
PREGNANCY	Z34.90
LACTATION	Z39.1
OTHER SPECIFIED MYOPATHIES	G72.89
MYOPATHY UNSPECIFIED	G72.9
DRUG INDUCED MYOPATHY	G72.0
ADVERSE EFFECT OF ANTIHYPERLIPIDEMIC AND ANTIARTERIOSCLEROTIC DRUGS, INITIAL ENCOUNTER	T46.6X5A
CURRENTLY IN HOSPICE	Z51.5

DIABETIC FOOT CARE	
FOOT EXAM PERFORMED; 3 CMPNTS	2028F
MONITORING FOR NEPHROPATHY	
POS MICROALBUMINURIA	3060F
NEG MICROALBUMINURIA	3061F
POS MACROALBUMINURIA	3062F
ACE INHIBITOR OR ARB THERAPY	4010F
TREATMENT OF NEPHROPATHY (PATIENT RECEIVING DIALYSIS, IN TRMT FOR ESRD, CRF, ARF OR RENAL INSUFFICIENCY, ANY VISIT TO A NEPHROLOGIST	3066F
RETINAL EYE EXAM	
DILATED RETINAL EYE EXAM WITH INTERPRETATION BY AN OPHTHAMOLOGIST OR OPTOMETRIST DOCUMENTED AND REVIEWED; WITH EVIDENCE OF RETINOPATHY	2022F
DILATED RETINAL EYE EXAM WITH INTERPRETATION BY AN OPHTHALMOLOGIST OF OPTOMETRIST DOCUMENTED AND REVIEWED; WITHOUT EVIDENCE OF RETINOPATHY	2023F
NO EVIDENCE OF RETINOPATHY IN THE PRIOR YEAR. (MUST HAVE DOCUMENTATION OF THE DATE, NAME OF PROVIDER WHO PERFORMED THE EXAM AND THE RESULT)	3072F
BLOOD PRESSURE MGMT	
MOST RECENT SYSTOLIC BLOOD PRESSURE <130 mm hg	3074F
MOST RECENT SYSTOLIC BLOOD PRESSURE 130-139 mm hg	3075F
MOST RECENT SYSTOLIC BLOOD PRESSURE ≥140 mm hg	3077F
MOST RECENT DIASTOLIC BLOOD PRESSURE < 80 mm hg	3078F
MOST RECENT SYSTOLIC BLOOD PRESSURE 80-89 mm hg	3079F
MOST RECENT DIASTOLIC BLOOD PRESSURE ≥ 90 mm hg	3080F
EXCLUSIONS	
ESRD DURING MEASUREMENT YEAR OR THE YEAR PRIOR	N18.6
KIDNEY TRANSPLANT	Z94.0
PREGNANCY DURING MEASUREMENT YEAR	Z34.90
HOSPICE CARE AGE 66 OR OLDER WITH ADVANCED ILLNESS AND FRAILITY For a complete list of codes that meet the exclusion for advanced illness and frailty, please use the QR code found at the bottom of the Care for Older Adults section	

ADULT BMI	
BMI DOCUMENTED **USE ICD 10 CODES TO INDICATE SPECIFIC BMI SCORES UNDER 20: Z68.1 20-69.9: Z68.20-Z68.44 OVER 70: Z68.45	3008F
OSTEOPOROSIS	
PHARMACOLOGIC THERAPY (NOT MINERALS/VITAMINS) FOR OSTEOPORISIS PRESCRIBED	4005F
OSTEOPOROSIS MANAGEMENT FOR WOMEN WITH FRACTURE	
PHARMACOLOGIC THERAPY (OTHER THAN VITAMINS/MINERALS) FOR OSTEOPOROSIS	4005F
CENTRAL DUAL-ENERGY X-RAY ABSORPTIOMETRY (DXA) RESULTS DOCUMENTED	3095F
EXCLUSIONS	
HAD BONE DENSITY TEST WITHIN THE 24 MONTHS PRIOR TO THE FRACTURE	
RECEIVED OSTEOPOROSIS THERAPY DURING THE 12 MONTHS PRIOR TO THE FRACTURE	
RECEIVED A DISPENSED RX OR HAD AN ACTIVE RX TO TREAT OSTEOPOROSIS DURING THE 365 DAYS PRIOR TO THE FRACTURE	
HOSPICE	
EXCLUSION FROM MEASURES DUE TO ADVANCED ILLNESS AND/OR FRAILITY PATIENTS AGE 66-80 MUST HAVE ADVANCED ILLNESS AND FRAILITY TO BE EXCLUDED. PATIENTS 81 AND OLDER QUALIFY FOR EXCLUSION WITH FRAILITY ALONE For a complete list of codes that meet the exclusion for advanced illness and frailty, please use the QR code found at the bottom of the Care for Older Adults section.	
OSTEOARTHRITIS ADULT	
PHYSICAL HISTORY/EXAMINATION	
OA ASSESSED	1006F
USE OF OTC MEDS FOR SYMPTOM RELIEF	1007F
NSAID RISK ASSESSMENT	1008F
INITIAL EXAM INVOLVED JOINTS	2004F
THERAPEUTIC OR OTHER INTERVENTIONS	
ANTI-INFLAMM/ANALGESIC THERAPY	4016F
GI PROPHYLAXIS FOR NSAID RX	4017F
THERAPY EXERCISE JOINT RX	4018F

RHEUMATOID ARTHRITIS MGMT	
ONE OR MORE DMARD DISPENSED, PRESCRIBED OR ADMINISTERED	4187F
EXCLUSIONS	
HIV ANYTIME DURING THE MEMBER'S HISTORY THROUGH DECEMBER 31 OF MEASUREMENT YEAR	B20 OR Z21
PREGNANCY	Z34.90
IMMUNIZATIONS	
INFLUENZA IMMUNIZATION STATUS ASSESSED	1030F
INFLUENZA IMMUNIZATION ADMINISTERED OR PREVIOUSLY RECEIVED	4274F
INFLUENZA IMMUNIZATION ORDERED OR ADMINISTERED	4037F
PNEUMOCOCCUS IMMUNIZATION STATUS ASSESSED	1022F
PNEUMOCOCCAL VACCINE ADMINISTERED OR PREVIOUSLY RECEIVED	4040F
EXCLUSIONS	
PREGNANCY	Z34.90
TOBACCO USE	
INQUIRY OF TOBACCO USE	
TOBACCO USE ASSESSED	1000F
CURRENT TOBACCO SMOKER	1034F
SMOKELESS TOBACCO USER	1035F
TOBACCO NON-USER	1036F
TOBACCO USE CESSATION INTERVTION, COUNSELING	4000F
TOBACCO USE CESSATION INTERVENTION, PHARMACOLOGIC THERAPY	4001F
PT SCREENED FOR TOBACCO USE AND RECEIVED TOBACCO CESSATION INTERVENTION	4004F
BREAST CANCER SCREENING	
SCREENING MAMMOGRAPHY RESULTS DOCUMENTED AND REVIEWED	3014F
EXCLUSIONS	
ACQUIRED ABSENCE OF BILATERAL BREASTS AND NIPPLES	Z90.13
ACQUIRED ABSENCE OF LEFT BREAST AND NIPPLE	Z90.12
ACQUIRED ABSENCE OF RIGHT BREAST AND NIPPLE	Z90.11