



# UnitedHealthcare Guide to Meeting Healthcare Effectiveness Data and Information Set (HEDIS®) Measures

We're always looking for ways to support your efforts to meet quality care standards. Together, we can help your patients who are UnitedHealthcare Community Plan in Texas members get the preventive care they need on time. We use data provided by the HEDIS measures to help UnitedHealthcare Medicare Advantage plan members manage existing medical conditions and better engage with their preventive health. Please review the following measure criteria and relevant codes to understand how these measures may affect your members' care plans. If you have questions, please contact your Provider Advocate.

In addition, every year, we update our PATH Reference Guides for Medicare Advantage Health measures, which give a comprehensive overview of National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS®) measures. Addressing care opportunities tied to these measures is key to reaching quality benchmarks and promoting healthier outcomes. The Reference Guides for Medicare Advantage Health measures is available at [UHCprovider.com/path](https://UHCprovider.com/path) > [Medicare Advantage PATH Resources](#).

Measure	Criteria	Screening Codes and Notes
<b>Adult BMI Assessment (ABA)</b> Patients who've had an outpatient visit and whose BMI was documented during the measurement year or previous year	Ages 18-74 <ul style="list-style-type: none"><li>BMI recorded during 2018 or 2019</li><li>Document date, weight and calculate BMI value</li></ul>	BMI Percentile: ICD-10: Z68.51, Z68.52, Z68.53, Z68.54  BMI: ICD-10: Z68.1, Z68.20-39, Z68.41-45
<b>Breast Cancer Screening (BCS)</b> Women who had a mammogram to screen for breast cancer between Oct. 1, 2018 and Dec. 31, 2020	Ages 52-74 <ul style="list-style-type: none"><li>Document date of mammogram</li><li>Exclusion: History of bilateral mastectomy or two unilateral mastectomies</li></ul>	CPT® Codes: 77055-77057, 77061-63, 77065-67 Healthcare Common Procedure Coding System (HCPCS) Codes: G0202, G0204, G0206 ICD-10-CM: Z90.13

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<p><b>Care for Older Adults (COA)</b> Dual Special Needs Plan (DSNP) Measure Only</p> <p>Patients who received the following services during the year:</p> <ul style="list-style-type: none"> <li>• Functional Status Assessment</li> <li>• Medication Review</li> <li>• Pain Screening</li> </ul>	<p>Ages 66 and older</p> <ul style="list-style-type: none"> <li>• Functional Status Assessment of a patient's ability to perform Activities of Daily Living (ADL). Approved tools include SF-36, Barthel Index and Katz Index. Visit notes indicating ADLs were assessed during the year are also accepted.</li> <li>• Medication Review: Assessment of whether the provider has reviewed or reconciled a list of all of the patient's prescription drugs during the year</li> <li>• Pain Screening: Assessment of whether the member has received a pain screening or pain management plan during the year. Standardized pain screening tools may be used, such as face pain scale or numeric pain scale</li> </ul>	<p>Functional Status Assessment: CPTII:1170F HCPCS Codes: G0438, G0439</p> <p>Medication Review and List: CPT Codes:1159F and 1160F, 99605-06, 90863, 99483</p> <p>HCPCS Code: G8427</p> <p>Pain Screening: CPT II: 1125F, 1126F</p>
<p><b>Colorectal Cancer Screening (COL)</b> Patients who received appropriate screening for colorectal cancer by one of the following methods:</p> <p>Colonoscopy: Between 2011-2020 Flex-Sigmoidoscopy: Between 2016-2020 FIT-DNA: Between 2018-2020 FOBT: In 2019</p>	<p>Ages 51-75</p> <ul style="list-style-type: none"> <li>• Document date and results of screening in the medical record</li> <li>• Exclusions: History of colorectal cancer or total colectomy</li> </ul>	<p>Colonoscopy CPT Codes: 44388-44394, 44397, 44401-08, 45355, 45378-93, 45398</p> <p>Colonoscopy HCPCS Codes: G0105, G0121</p> <p>Flex-Sigmoidoscopy CPT Codes: 45330-35, 45337-42, 45345-47, 45349-50 Flex-Sigmoidoscopy Procedure Code System (FOBT)_ HCPCS Codes: G0104</p> <p>FIT-DNA CPT Code: 81528 FIT-DNA HCPCS Codes: G0464</p> <p>FOBT CPT Code: 82270, 82274 FOBT HCPCS CODE: G0328</p>
<p><b>Controlling High Blood Pressure (CBP)</b> Patients who had a diagnosis of hypertension and whose blood pressure was adequately controlled (&lt;140/90) during the measurement year</p>	<p>Ages 18-85</p> <ul style="list-style-type: none"> <li>• Blood pressure goal should be &lt;140/90</li> </ul>	<p>Self-reported results are not acceptable. The last blood pressure reading of the year will be the representative blood pressure reading used.</p> <p>Systolic Blood Pressure: 8480-6 Systolic less than 130: 3074F Systolic between 130 to 139: 3075F Systolic greater than/equal to 140: 3077F</p> <p>Diastolic blood pressure: 8462-4 Diastolic less than 80: 3078F Diastolic between 80 to 89: 3079F Diastolic greater than/equal to 90: 3080F</p>

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<p><b>Comprehensive Diabetes Care (CDC)</b> Patients with type 1 or 2 diabetes who had an HgbA1c screening, retinal eye exam and medical attention for nephropathy during the year</p>	<p>Ages 18-75</p> <ul style="list-style-type: none"> <li>• Medical attention for nephropathy</li> <li>• HgbA1c screening (results &lt;9)</li> <li>• Retinal eye exam during 2018 or negative exam during 2019</li> <li>• Document dates and values</li> </ul>	<p>Last HgbA1c screening taken that year: CPT Codes: 83036-83037, 3044F-46F, 3046F, 3051F and 3052F</p> <p>Nephropathy: CPT Codes: 8100-81003, 81005, 82042-82044, 84156 CPTII: 3060F, 3061F, 3062F, 3066F, 4010F (for patients prescribed an Angiotensin Converting Enzyme [ACE] inhibitor or Angiotensin Receptor Blocker [ARB])</p> <p>Dilated retinal eye exam must be completed by an eye care professional.</p> <p>Code 2022F, 2023F, 2024F, 2025F, 2026F and 2033F is for diabetic retinal screening negative</p>
<p><b>Medication Reconciliation Post- Discharge (MRP)</b> Patients whose medications were reconciled within 30 days of discharge (31 days total)</p>	<p>Ages 18 and older</p> <ul style="list-style-type: none"> <li>• Medication reconciliation conducted by a prescribing practitioner, clinical pharmacist or registered nurse on the date of discharge through 30 days after discharge</li> </ul>	<p>CPT: 99495, 99496, 99483, 1111F</p>
<p><b>Medication Adherence</b> Diabetes Hypertension (RAS antagonist) Cholesterol (Statins)</p>	<p>Ages 18 and older</p> <ul style="list-style-type: none"> <li>• Percentage of members with a prescription for diabetes, hypertension or cholesterol medications who fill it often enough to cover 80% or more of the time they're supposed to be taking the medication</li> </ul>	<p>Prescribing 90-day refills helps with medication adherence.</p>
<p><b>Osteoporosis Fracture Management (OMW)</b> Women who suffered a fracture and had either a bone mineral density (BMD) test or a prescription for a drug to treat osteoporosis within 6 months after the fracture</p> <p>A 12-month (1-year) window that begins on July 1 of the year, prior to the measurement year, and ends on June 30 of the measurement year. The Intake Period is used to capture the first fracture.</p>	<p>Ages 67-85</p> <ul style="list-style-type: none"> <li>• BMD test or prescription to treat osteoporosis within six months after a fracture</li> <li>• Document date of BMD or prescription</li> <li>• <b>Members, ages 67-80, are excluded</b> if there is a diagnosis of frailty, advanced illness and living in a long-term care institution</li> </ul>	<p>BMD Test: CPT Codes: 76977, 77078, 77080-77082, 77085-86</p> <p>HCPCS Code: G0130</p> <p>Osteoporosis Medication HCPCS Codes: J0897, J1740, J3110, J3489</p>
<p><b>Plan All-Cause Readmissions (PCR)</b> The number of acute inpatient stays between Jan. 1 and Dec. 1 during the measurement year that were followed by an unplanned acute readmission for any diagnosis within 30 days</p>	<p>Ages 18 and older</p>	<p>A lower rate constitutes a better score</p>

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<p><b>Rheumatoid Arthritis (ART)</b> Patients with a diagnosis of rheumatoid arthritis who were dispensed at least one ambulatory prescription for a disease-modifying, anti-rheumatic drug (DMARD)</p>	<p>Ages 18 and older as of the measurement year</p> <ul style="list-style-type: none"> <li>• Two face-to-face, telephonic and online assessment encounters with different dates of service showing a rheumatoid arthritis diagnosis and subsequent dispense of at least one DMARD prescription during the year</li> </ul>	<p>HCPCS Codes: J0129, J0135, J0717, J1438, J1600, J1602, J1745, J3262, J7502, J7515-18, J9250, J9260, J9310</p>
<p><b>Statin Use in Persons with Diabetes (SUPD)</b> Members who receive at least one fill of a statin medication in the measurement year</p>	<p>Ages 40-75</p> <ul style="list-style-type: none"> <li>• Members who receive at least one fill of a statin medication in the measurement year</li> </ul>	
<p><b>Statin Therapy for Patients with Cardiovascular Disease (SPC)</b> Members who remained on a high-intensity or moderate-intensity statin medication for at least 80% of the treatment period. The period of time beginning on the index prescription start date (IPSD) through the last day of the measurement year</p>	<ul style="list-style-type: none"> <li>• Male: ages 21-75</li> <li>• Female: ages 40-75</li> </ul>	

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