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 > Medicare Advantage PATH Resources.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Criteria</th>
<th>Screening Codes and Notes</th>
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</thead>
<tbody>
<tr>
<td><strong>Adult BMI Assessment (ABA)</strong></td>
<td>Patients who’ve had an outpatient visit and whose BMI was documented during the measurement year or previous year</td>
<td>BMI Percentile: ICD-10: Z68.51, Z68.52, Z68.53, Z68.54 BMI: ICD-10: Z68.1, Z68.20-39, Z68.41-45</td>
</tr>
<tr>
<td><strong>Criteria</strong></td>
<td>Ages 18-74</td>
<td>BMI recorded during 2018 or 2019 Document date, weight and calculate BMI value</td>
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<tr>
<td><strong>Screening Codes and Notes</strong></td>
<td>Ages 52-74</td>
<td>Document date of mammogram Exclusion: History of bilateral mastectomy or two unilateral mastectomies</td>
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</tbody>
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| Care for Older Adults (COA) | Ages 66 and older  
Dual Special Needs Plan (DSNP)  
Measure Only  
Patients who received the following services during the year:  
- Functional Status Assessment  
- Medication Review  
- Pain Screening | Functional Status Assessment:  
CPT II: 1170F  
HCPCS Codes: G0438, G0439  
Medication Review and List:  
CPT Codes: 1159F and 1160F, 99605-06, 90863, 99483  
HCPCS Code: G8427  
Pain Screening:  
CPT II: 1125F, 1126F |
|--------------------------|---------------------------------------------------------------|
| Colorectal Cancer Screening (COL) | Ages 51-75  
Patients who received appropriate screening for colorectal cancer by one of the following methods:  
Colonoscopy: Between 2011-2020  
Flex-Sigmoidoscopy: Between 2016-2020  
FIT-DNA: Between 2018-2020  
FOBT: In 2019 | Colonoscopy CPT Codes: 44388-44394, 44397, 44401-08, 45355, 45378-93, 45398  
Colonoscopy HCPCS Codes: G0105, G0121  
Flex-Sigmoidoscopy CPT Codes: 45330-35, 45337-42, 45345-47, 45349-50  
Flex-Sigmoidoscopy Procedure Code System (FOBT): HCPCS Codes: G0104  
FIT-DNA CPT Code: 81528  
FIT-DNA HCPCS Codes: G0464  
FOBT CPT Code: 82270, 82274  
FOBT HCPCS CODE: G0328 |
| Controlling High Blood Pressure (CBP) | Ages 18-85  
Patients who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90) during the measurement year | Self-reported results are not acceptable. The last blood pressure reading of the year will be the representative blood pressure reading used.  
Systolic Blood Pressure: 8480-6  
Systolic less than 130: 3074F  
Systolic between 130 to 139: 3075F  
Systolic greater than/equal to 140: 3077F  
Diastolic blood pressure: 8462-4  
Diastolic less than 80: 3078F  
Diastolic between 80 to 89: 3079F  
Diastolic greater than/equal to 90: 3080F |
### Comprehensive Diabetes Care (CDC)

**Patients** with type 1 or 2 diabetes who had an HgbA1c screening, retinal eye exam and medical attention for nephropathy during the year

**Ages 18-75**
- Medical attention for nephropathy
- HgbA1c screening (results <9)
- Retinal eye exam during 2018 or negative exam during 2019
- Document dates and values

**Last HgbA1c screening taken that year:**
- CPT Codes: 83036-83037, 3044F-46F, 3046F, 3051F and 3052F

**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])

**Dilated retinal eye exam must be completed by an eye care professional.**
- Code 2022F, 2023F, 2024F, 2025F, 2026F and 2033F is for diabetic retinal screening negative

### Medication Reconciliation Post-Discharge (MRP)

**Patients** whose medications were reconciled within 30 days of discharge (31 days total)

**Ages 18 and older**
- Medication reconciliation conducted by a prescribing practitioner, clinical pharmacist or registered nurse on the date of discharge through 30 days after discharge

**CPT:** 99495, 99496,99483,1111F

### Medication Adherence

**Diabetes Hypertension (RAS antagonist)**
**Cholesterol (Statins)**

**Ages 18 and older**
- 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

**Prescribing 90-day refills helps with medication adherence.**

### Osteoporosis Fracture Management (OMW)

**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

**Ages 67-85**
- BMD test or prescription to treat osteoporosis within six months after a fracture
- Document date of BMD or prescription
- **Members, ages 67-80, are excluded**
  - if there is a diagnosis of frailty, advanced illness and living in a long-term care institution

**BMD Test:**
- CPT Codes: 76977, 77078, 77080-77082, 77085-86
- HCPCS Code: G0130

**Osteoporosis Medication**
- HCPCS Codes: J0897, J1740, J3110, J3489

### Plan All-Cause Readmissions (PCR)

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

**Ages 18 and older**

**A lower rate constitutes a better score**

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<tr>
<th><strong>Rheumatoid Arthritis (ART)</strong></th>
<th>Ages 18 and older as of the measurement year</th>
<th>HCPCS Codes: J0129, J0135, J0717, J1438, J1600, J1602, J1745, J3262, J7502, J7515-18, J9250, J9260, J9310</th>
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<td>Patients with a diagnosis of rheumatoid arthritis who were dispensed at least one ambulatory prescription for a disease-modifying, anti-rheumatic drug (DMARD)</td>
<td>• 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</td>
<td></td>
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<th><strong>Statin Use in Persons with Diabetes (SUPD)</strong></th>
<th>Ages 40-75</th>
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<td>Members who receive at least one fill of a statin medication in the measurement year</td>
<td>• Members who receive at least one fill of a statin medication in the measurement year</td>
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<th><strong>Statin Therapy for Patients with Cardiovascular Disease (SPC)</strong></th>
<th>Male: ages 21-75</th>
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<td>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</td>
<td>Female: ages 40-75</td>
<td></td>
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