

Key HEDIS Factors to Consider

Rates are calculated based on specific date criteria for when the service is performed/administered, as defined by NCQA.

- A. Postpartum care between 21 – 56 days after delivery
- B. Some measures require the service to be completed ***anytime before 12/31 of the measurement year.***
For example: Breast Cancer & Cervical Cancer Screenings.

HEDIS data is collected through claims (administrative data) or *claims & medical record* data (Hybrid data).

- For claim (admin) data, procedure codes must reflect the actual service performed, general E&M codes *cannot* be counted for most measures (except Adult Access to Care).

Ambulatory/Preventive Health Services:

- Age Group: 20 and older
- Look back period: measurement year
- Requirements: an ambulatory or preventive care visit during the measurement year.

CPT codes: **Office/Outpatient:** 99201-99205, 99211-99215, 99241-99245.

Breast Cancer Screening:

- Age Group: 50 – 74 years as of 12/31
- Look back period: measurement year and prior year
- Requirements: a mammogram at least once in the past two years. *Women who have had a bilateral mastectomy are exempt from this measure.*

CPT: 77055-77057
HCPCS: G0202, G0204, G0206

Cervical Cancer Screening:

- Age Group: 21 – 64 years as of 12/31
- Look back period: measurement year and up to 5 years prior
- Requirements: Cervical cytology every 3 years for ages 21-64 yrs.; cervical cytology/human papillomavirus (HPV) co-testing performed every 5yrs (must occur within 4days of each other) for ages 30-64 yrs. *Women who have had a total hysterectomy without residual cervix are exempt.*

CPT (age 21-64): 88141-88143, 88147, 88148, 88150, 88152-88155, 88164-88167, 88174, 88175. CPT (age 30-64): 87623, 87624, 87625

Chlamydia Screening:

- Age Group: 16 – 24 years as of 12/31
- Look back period: measurement year
- Requirements: women who were identified as sexually active and had at least one test for chlamydia per year; *chlamydia test can be completed using any method, including urine test.*

CPT: 87110, 87270, 87320, 87490-87492, 87810

Frequency of Prenatal Care:

- Age Group: none
- Look back period: measurement year and/or prior year
- Requirements: expected (recommended) number of prenatal care visits.
- Considerations: the recommended number of prenatal visits is determined by the gestational age and state of pregnancy at time of enrollment per ACOG.

Osteoporosis Management in Women who had a fracture:

- Age Group: 67-85 yrs.
- Requirements: had either a bone mineral density (BMD) test or prescription for a drug to treat osteoporosis in the 6months after fracture

CPT: 76977, 77078, 77080

Prenatal Care:

- Age Group: None
- Look back period: measurement year and/or prior year
- Requirements: timely prenatal care visit in the first trimester or within 42 days of member enrollment with plan.

Postpartum Care:

- Age Group: None
- Look back period: live births between November 6 of the year prior and November 5th of the measurement year (11/6/prior yr. – 11/5/measurement yr.).
- Requirements: a postpartum visit on ***or between 21 and 56 days*** after delivery (*3 and 8 weeks*).