

HEDIS[®] for measurement year 2023: Healthcare Effectiveness Data and Information Set





Prevention and screening:

Measure	Screening, test, or care needed
<p>Colorectal Cancer Screening (COL) Adults ages 45 to 75</p> <p>CPT® codes for colorectal cancer screening: FOBT: 82270; 82274 FIT-DNA: 81528</p> <p>Flexible sigmoidoscopy: 45330 to 45335; 45337 to 45342; 45346, 45347; 45349,45350</p> <p>CT colonography: 74261 to 74263</p> <p>Colonoscopy: 44388 to 44394; 44397; 44401 to 44408; 45355; 45378 to 45393; 45398</p>	<p>One or more of the following screenings:</p> <ul style="list-style-type: none"> • Fecal occult blood test (iFOBT or gFOBT) annually in the measurement year (2023) • Flexible sigmoidoscopy in the past 5 years (2019-2023) • Colonoscopy in past 10 years (2014-2023) • CT colonography (for example, virtual colonoscopy) in the past five years (2019-2023) • FIT-DNA (for example,, Cologuard) test in the past 3 years (2021-2023) • Exclusions: <ul style="list-style-type: none"> • Diagnosis of colorectal cancer or total colectomy any time during the member’s history through the measurement year. • Members in hospice or using hospice services or receiving palliative care any time during the measurement year. • Members who died any time during the measurement year. <p>Note: Do not count digital rectal exams (DRE), FOBT tests performed in an office setting, or performed in a sample collected via DRE.</p>
<p>Care for Older Adults (COA) * Medicare Adults 66 years of age and older</p> <p>CPT codes for COA: Medication Review: 1160F 90863, 99483, 99605, 99606</p> <p>Medication List: 1159F</p> <p>Transition Care Management: 99495, 99496</p> <p>Functional Status Assessment: 1170F, 99483</p> <p>Pain Assessment: 1125F, 1126F</p>	<ul style="list-style-type: none"> • Members who had each of the following during the measurement year (2023): <ul style="list-style-type: none"> • Medication review — A review of all a member’s medications, including prescription medications, OTC medications, and herbal or supplemental therapies. • Functional status assessment — A complete functional assessment and the date when it was performed. • Pain assessment — Notation of a pain assessment and the date it was performed. • Do not include pain assessments performed in an acute inpatient setting • The functional status assessment and pain assessment indicators do not require a specific setting; therefore, services rendered during telephone visit, e-visit, or virtual check-in meet criteria. • Notation alone of a pain management or treatment plan does not meet criteria. • Exclusions: <ul style="list-style-type: none"> • Members in hospice or using hospice services any time during the measurement year. • Members who died any time during the measurement year.

Respiratory conditions:

Measure	Screening, test, or care needed
<p>Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR) Adults 40 years and older</p> <p>CPT codes for spirometry testing: 94010; 94014 to 94016; 94060; 94070; 94375; 94620</p>	<p>One or more of the following screenings:</p> <ul style="list-style-type: none"> • Fecal occult blood test (iFOBT or gFOBT) annually in the measurement year (2023) • Flexible sigmoidoscopy in the past 5 years (2019-2023) • Colonoscopy in past 10 years (2014-2023) • CT colonography (for example, virtual colonoscopy) in the past five years (2019-2023) • FIT-DNA (for example, Cologuard) test in the past 3 years (2021-2023) • Exclusions: <ul style="list-style-type: none"> • Diagnosis of colorectal cancer or total colectomy any time during the member’s history through the measurement year. • Members in hospice or using hospice services or receiving palliative care any time during the measurement year. • Members who died any time during the measurement year. <p>Note: Do not count digital rectal exams (DRE), FOBT tests performed in an office setting, or performed in a sample collected via DRE.</p>
<p>Care for Older Adults (COA) * Medicare Adults 66 years of age and older</p> <p>CPT codes for COA: Medication Review: 1160F 90863, 99483, 99605, 99606</p> <p>Medication List: 1159F</p> <p>Transition Care Management: 99495, 99496</p> <p>Functional Status Assessment: 1170F, 99483</p> <p>Pain Assessment: 1125F, 1126F</p>	<ul style="list-style-type: none"> • Diagnosis of a new or newly active COPD between July 1, 2022, to June 30, 2023, and; • Spirometry testing to confirm the diagnosis in the two years prior through six months after the diagnosis • Exclusions: <ul style="list-style-type: none"> • Members in hospice or using hospice services any time during the measurement year. • Members who died any time during the measurement year.



Cardiovascular:

Measure	Screening, test, or care needed
<p>Controlling High Blood Pressure (CBP) Adults ages 18 to 85</p> <p>Adequate control is defined as: < 140/90</p> <p>ICP-10 codes to identify HTN: I10</p> <p>CPT II codes for BP values:</p> <ul style="list-style-type: none"> Systolic less than 140: 3074F, 3075F Systolic greater than/equal to 140: 3077F Diastolic less than 80: 3078F Diastolic 80 to 89: 3079F Diastolic greater than/equal to 90: 3080F 	<ul style="list-style-type: none"> Diagnosis hypertension (HTN) Most recent blood pressure reading in the medical record for 2023. Exclusions: <ul style="list-style-type: none"> Members in hospice or using hospice services or receiving palliative care any time during the measurement year. Members with evidence of end-stage renal disease (ESRD), dialysis, nephrectomy, or kidney transplant any time during the member's history on or prior to December 31 of the measurement year. Members with a diagnosis of pregnancy any time during the measurement year. Members who died any time during the measurement year.
<p>Statin Therapy for Patients with Cardiovascular Disease (SPC) Males ages 21 to 75; Females ages 40 to 75</p> <p>Moderate or high-intensity statin therapy:</p> <ul style="list-style-type: none"> Atorvastatin: 10 to 80 mg Amlodipine-atorvastatin: 10 to 80 mg Rosuvastatin: 5 to 40 mg Simvastatin: 20 to 80 mg Ezetimibe-simvastatin: 20 to 80 mg Pravastatin: 40 to 80 mg Lovastatin: 40 mg Fluvastatin 40 to 80 mg Pitavastatin 1 to 4 mg <p>ICD-10 codes for myalgia/myositis/myopathy: G72.0; G72.2; G72.9; M60.80 to M60.812; M60.819; M60.821 to M60.822; M60.829; M60.831 to M60.832; M60.839; M60.841-M60.842; M60.849; M60.851 to M60.852; M60.859; M60.861 to M60.862; M60.869; M60.871 to M60.872; M60.879; M60.88 to M60.89; M60.9; M62.82; M79.1 to M79.12; M79.18</p>	<ul style="list-style-type: none"> Identified as having clinical atherosclerotic cardiovascular disease (ASCVD) during the measurement year (2023). Two rates are reported: <ul style="list-style-type: none"> Received statin therapy: <ul style="list-style-type: none"> Members who were dispensed at least one high- or moderate-intensity statin medication during the measurement year. Statin adherence 80%: <ul style="list-style-type: none"> Members who remained on a high- or moderate-intensity statin medication for at least 80% of the treatment period (from prescription date through end of year). Exclude members who meet any of the following criteria: <ul style="list-style-type: none"> Diagnosis of pregnancy or had IVF during the measurement year or the year prior.

Musculoskeletal:

Measure	Screening, test, or care needed
<p>Osteoporosis Management in Women Who Had a Fracture (OMW) * Medicare Women ages 67 to 85</p> <p>CPT codes to identify BMD test: 76977; 77078; 77080 to 77081; 77085 to 77086</p> <p>HCPCS codes for osteoporosis meds: J0897; J1740; J3110; J3489</p>	<ul style="list-style-type: none"> Suffered a fracture and had one of the following in the six months after the fracture: <ul style="list-style-type: none"> A bone mineral density (BMD) test or A prescription for a drug to treat osteoporosis. Exclusions: <ul style="list-style-type: none"> Members in hospice or using hospice services any time during the measurement year. Members who had an encounter for osteoporosis therapy or were prescribed or had an active prescription to treat osteoporosis during the 12 months prior to the episode date. Members who received palliative care any time during the intake period through the end of the measurement year. Members who died any time during the measurement year.
<p>Advance Care Planning (ACP) *Medicare Adults ages 66 to 80 with advanced illness, an indication of frailty or receiving palliative care, and adults ages 81 years and older who had advanced care planning during the measurement year (2023)</p> <p>CPT codes to identify advance care planning: 99483, 99497</p>	<ul style="list-style-type: none"> Advanced care planning is the discussion or documentation about preferences for resuscitation, life-sustaining treatment, or end of life care. Exclusions: <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
<p>Follow-up After Emergency Department Visit for People with Multiple High-Risk Chronic Conditions (FMC) * Medicare Ages 18 and older</p>	<ul style="list-style-type: none"> Members with emergency department (ED) visits who have multiple (two or more) high-risk chronic conditions such as COPD/asthma, dementia, CKD, major depression, heart failure, MI, atrial fibrillation, and stroke who had a follow-up service within seven days of the ED visit (eight total days). Exclusions: <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
<p>Transitions of Care (TRC) * Medicare Adults ages 18 and older</p> <p>CPT codes for transitional care management services and medication reconciliation: 99483, 99495, 99496, 111F</p>	<ul style="list-style-type: none"> Documentation in the PCP record of the following in 2023: <ul style="list-style-type: none"> Notification of inpatient admission on the day of admission through two days after. Receipt of discharge information on the day of discharge through two days after. Patient engagement after inpatient discharge (for example, office visits, home visits, and telehealth) provided within 30 days after discharge. Medication reconciliation post-discharge conducted by a prescribing practitioner, clinical pharmacist, physician assistant, or registered nurse on the date of discharge through 30 days after discharge (documentation of review of both a list of the member's current outpatient medications and the discharge medications, or notation that no medications were prescribed upon discharge). Exclusions: <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.



Diabetes:

Measure	Screening, test, or care needed
<p>Hemoglobin A1c Control for Patients with Diabetes (HBD) Adults ages 18 to 75</p> <p>ICD-10 Codes to identify diabetes: E10.10, E10.11, E10.21, E10.22, E10.29, E11.00 to E11.9; E13.00 to E13.9</p> <p>CPT/CPT II for HbA1c: 83036, 83037, 3044F, 3046F, 3051F, 3052F</p>	<ul style="list-style-type: none"> Diagnosis of diabetes (types 1 and 2) whose hemoglobin A1c (HbA1c) was at the following levels from measurement year (2023): <ul style="list-style-type: none"> HbA1c control (< 8.0%) HbA1c poor control (> 9.0%) Exclusions: <ul style="list-style-type: none"> Members who did not have a diagnosis of diabetes in any setting during the measurement year or the year prior but did have: <ul style="list-style-type: none"> Polycystic ovarian syndrome, gestational diabetes, or steroid-induced diabetes. Members in hospice, using hospice services, or receiving palliative care any time during the measurement year. Members who died any time during the measurement year.
<p>Blood Pressure Control for Patients with Diabetes (BPD) Adults ages 18 to 75</p> <p>ICD-10 codes to identify diabetes: E10.10, E10.11, E10.21, E10.22, E10.29, E11.00 to E11.9; E13.00 to E13.9</p> <p>CPT/CPT II codes for BP values:</p> <ul style="list-style-type: none"> Systolic less than 140: 3074F, 3075F Systolic greater than/equal to 140: 3077F Diastolic less than 80: 3078F Diastolic 80 to 89: 3079F Diastolic greater than/equal to 90: 3080F 	<ul style="list-style-type: none"> Diagnosis of diabetes (types 1 and 2) whose blood pressure was adequately controlled (<140/90 mm Hg) during the measurement year (2023). Exclusions: <ul style="list-style-type: none"> Members who did not have a diagnosis of diabetes in any setting during the measurement year or the year prior but did have: <ul style="list-style-type: none"> Polycystic ovarian syndrome, gestational diabetes, or steroid-induced diabetes. Members in hospice, using hospice services, or receiving palliative care any time during the measurement year. Members who died any time during the measurement year.
<p>Eye Exam for Patients with Diabetes (EED) Adults ages 18 to 75</p> <p>ICD-10 codes to identify diabetes: E10.10, E10.11, E10.21, E10.22, E10.29, E11.00 to E11.9; E13.00 to E13.9</p> <p>CPT/CPT II codes for diabetic retinal screening: 67028, 67030, 67031, 67036, 67039 to 67043, 67101, 67105, 67107, 67108, 67110, 67113, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228, 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92201, 92202, 92225 to 92228, 92230, 92235, 92240, 92250, 92260, 99203 to 92205, 99213 to 99215, 99242 to 99245, 2022F to 2026F, 2033F, 3072F</p>	<ul style="list-style-type: none"> Diagnosis of diabetes (types 1 and 2) who had one of the following: <ul style="list-style-type: none"> A retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in 2023, A negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional (optometrist or ophthalmologist) in 2022, or Bilateral eye enucleation any time during the member's history through December 31 of the measurement year. Exclusions: <ul style="list-style-type: none"> Members who did not have a diagnosis of diabetes in any setting during the measurement year or the year prior but did have: <ul style="list-style-type: none"> Polycystic ovarian syndrome, gestational diabetes, or steroid-induced diabetes. Members in hospice, using hospice services, or receiving palliative care any time during the measurement year. Members who died any time during the measurement year.

Diabetes (cont.):

Measure	Screening, test, or care needed
<p>Kidney Health Evaluation for Patients with Diabetes Adults ages 18 to 85</p> <p>ICD-10 codes to identify diabetes: E10.10, E10.11, E10.21, E10.22, E10.29, E11.00, E11.9; E13.00 to E13.9</p> <p>CPT codes:</p> <ul style="list-style-type: none"> eGFR: 80047 to 80048; 80050; 80053; 80069; 82565 uACR: 82043; 82570 	<ul style="list-style-type: none"> Diagnosis of diabetes (types 1 and 2) who received a kidney health evaluation during the measurement year (2023), defined by: <ul style="list-style-type: none"> An estimated glomerular filtration rate (eGFR), A urine albumin-creatinine ratio (uACR). Exclusions: <ul style="list-style-type: none"> Members who did not have a diagnosis of diabetes in any setting during the measurement year or the year prior but did have: <ul style="list-style-type: none"> Polycystic ovarian syndrome, gestational diabetes, or steroid-induced diabetes. Members with evidence of ESRD or dialysis any time during the member's history on or prior to December 31 of the measurement year. Members in hospice, using hospice services, or receiving palliative care any time during the measurement year. Members who died any time during the measurement year.
<p>Statin Therapy for Patients with Diabetes (SPD) Adults ages 40 to 75</p> <p>ICD-10 codes for myalgia, myositis, myopathy: G72.0; G72.2; G72.9; M60.80 to M60.812; M60.819; M60.821 to M60.822; M60.829; M60.831 to M60.832; M60.839; M60.841 to M60.842; M60.849; M60.851 to M60.852; M60.859; M60.861 to M60.862; M60.869; M60.871 to M60.872; M60.879; M60.88 to 60.89; M60.9; M62.82; M79.11 to M79.12; M79.18</p>	<ul style="list-style-type: none"> Identified as having diabetes but do not have clinical atherosclerotic cardiovascular disease (ASCVD) who met the following criteria: <ul style="list-style-type: none"> Two rates are reported: <ul style="list-style-type: none"> Received statin therapy: Members who were dispensed at least one statin medication of any intensity during the measurement year (2023). <ul style="list-style-type: none"> Statin adherence 80%: Members who remained on a statin medication of any intensity for at least 80% of the treatment period (from prescription date through end of year). Exclusions: <ul style="list-style-type: none"> Members who did not have a diagnosis of diabetes in any setting during the measurement year or the year prior but did have polycystic ovarian syndrome, gestational diabetes, or steroid-induced diabetes. Members diagnosed with myalgia, myositis, myopathy, or rhabdomyolysis (in 2023). Any of the following (in 2022 or 2023): <ul style="list-style-type: none"> IVD diagnosis, pregnancy/IVF, prescribed clomiphene, ESRD or dialysis, or cirrhosis. Members diagnosed with one of the following during the year prior to the measurement year: <ul style="list-style-type: none"> MI, CABG, PCI, or other revascularization. Members in hospice, using hospice services, or receiving palliative care any time during the measurement year. Members who died any time during the measurement year.





<https://provider.simplyhealthcareplans.com>

Simply Healthcare Plans, Inc. is a Medicare contracted coordinated care plan that has a Medicaid contract with the State of Florida Agency for Health Care Administration to provide benefits or arrange for benefits to be provided to enrollees. Enrollment in Simply Healthcare Plans, Inc. depends on contract renewal.

FLSMPLY-CR-014231-22