

## HEDIS Coding Tips

The following CPT®, ICD-10-CM, and HCPCS codes can help reduce the number of medical records we request during HEDIS® medical record review season (January to May each year). Adding these codes to a claim will help us identify additional information about the visit and improve the accuracy of reporting quality measures.\*

### Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)

Codes to identify weight assessment, counseling for nutrition and physical activity

Member-collected biometric values (height, weight, BMI percentile) are eligible for use:

Description	CPT	ICD-10-CM	HCPCS
BMI percentile		<ul style="list-style-type: none"> <li>Z68.51: Body mass index (BMI) pediatric, less than 5th percentile for age</li> <li>Z68.52: BMI pediatric, 5th percentile to less than 85th percentile for age</li> <li>Z68.53: BMI pediatric, 85th percentile to less than 95th percentile for age</li> <li>Z68.54 BMI pediatric, greater than or equal to 95th percentile for age</li> </ul>	
Nutrition counseling	97802, 97803, 97804	Z71.3: Dietary counseling and surveillance	<ul style="list-style-type: none"> <li>G0270: Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), individual, face to face with the patient, each 15 minutes</li> <li>G0271: Medical nutrition therapy, reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), group (2 or more individuals), each 30 minutes</li> </ul>

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<https://providers.anthem.com/ky>

			<ul style="list-style-type: none"> <li>• G0447: Face-to-face behavioral counseling for obesity, 15 minutes</li> <li>• S9449: Weight management classes, non-physician provider, per session</li> <li>• S9452: Nutrition classes, non-physician provider, per session</li> <li>• S9470: Nutritional counseling, dietitian visit</li> </ul>
Physical activity counseling		<ul style="list-style-type: none"> <li>• Z02.5: Encounter for examination for participation in sport</li> <li>• Z71.82: Exercise counseling</li> </ul>	<ul style="list-style-type: none"> <li>• G0447: Face-to-face behavioral counseling for obesity, 15 minutes</li> <li>• S9451: Exercise classes, non-physician provider, per session</li> </ul>

Codes to identify outpatient visit:

CPT	HCPCS
99202-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99429, 99455, 99456, 99483	G0402, G0438, G0439, G0463, T1015

**Well-Child Visits in the First 30 Months of Life (W30)**

Codes to identify well-care visits:

CPT	HCPCS	ICD-10-CM
99381-99385, 99391-99395, 99461	G0438, G0439, S0302, S0610, S0612, S0613	Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z01.411, Z01.419, Z02.5, Z76.1, Z76.2

**Child and Adolescent Well-Care Visits (WCV)**

Codes to identify well-care visits:

CPT	HCPCS	ICD-10-CM
99381-99385, 99391-99395, 99461	G0438, G0439, S0302, S0610, S0612, S0613	Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z00.3, Z01.411, Z01.419, Z02.5, Z76.1, Z76.2

**Childhood Immunization Status (CIS)**

Vaccines administered by their 2nd birthday:

- Four diphtheria, tetanus, and acellular pertussis (DTaP) — Do not give prior to 42 days after birth.
- Three polio (IPV) — Do not give prior to 42 days after birth.
- One measles, mumps, and rubella (MMR) — Must be given between the 1st and 2nd birthday.
- Three hepatitis B (Hep B) — One of the three vaccinations can be a newborn Hep B vaccination.
- Three haemophilus influenza type B (HiB) — Do not give prior to 42 days after birth.
- One chicken pox (VZV) — Must be given between the 1st and 2nd birthday.
- Four pneumococcal conjugate (PCV) — Do not give prior to 42 days after birth.
- One hepatitis A (Hep A) — Must be given between the 1st and 2nd birthday.
- Two-three rotavirus (RV) — Do not give prior to 42 days after birth.
- Two influenza (flu) vaccines — Do not give prior to six months (180 days) after birth. One of the two vaccines can be LAIV vaccination on the child's 2nd birthday.

Codes to identify vaccine procedures:

Description	CPT
DTaP	90697, 90698, 90700, 90723
IPV	90697, 90698, 90713, 90723
MMR	90707, 90710
HiB	90644, 90647, 90648, 90697, 90698, 90748
VZV	90710, 90716
Hep B	90697, 90723, 90740, 90744, 90747, 90748
PCV	90670
Hep A	90633
RV (two-dose schedule)	90681
RV (three-dose schedule)	90680
Flu	90655, 90657, 90661, 90673, 90685-90689 LAIV: 90660, 90672

**Immunizations for Adolescents (IMA)**

Vaccines administered on or before their 13th birthday:

- One MCV/meningococcal vaccine on or between 11th and 13th birthday
- One Tdap vaccine on or between their 10th and 13th birthday
- Three doses of HPV vaccine administered on or between 9th and 13th birthday or two doses of HPV with at least 146 days between first and second dose

Codes to identify vaccine procedures:

Description	CPT
Meningococcal	90619, 90733, 90734
Tdap	90715
HPV	90649, 90650, 90651

**Lead Screening in Children (LSC) prior to 2nd birthday**

CPT
83655

**Follow-Up Care for Children Prescribed ADHD Medication (ADD)**

Health and behavior assessment or intervention:

CPT
96150-96154, 96156, 96158, 96159, 96164, 96165, 96167, 96168, 96170, 96171

**Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)**

Cholesterol lab test:

CPT
82465, 83718, 83722, 84478

Glucose lab test:

CPT
80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951

HbA1c lab test:

CPT
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83036, 83037

LDL-C lab test:

**CPT**

80061, 83700, 83701, 83704, 83721

**Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)**

Psychosocial care codes:

<b>CPT</b>	<b>HCPCS</b>
90832-90834, 90836-90840, 90845-90847, 90849, 90853, 90875, 90876, 90880	G0176, G0177, G0409-G0411, H0004, H0035-H0040, H2000, H2001, H2011-H2014, H2017-H2020, S0201, S9480, S9484, S9485

\* The codes listed are for informational purposes only and are not intended to suggest or guide reimbursement. If applicable, refer to your provider contract or health plan contact for reimbursement information. For a complete list of CPT codes, go to the [American Medical Association website](#).



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