



# **HEDIS** Well-Child and Immunizations Coding Bulletin

Healthcare Effectiveness Data Information Set® (HEDIS) is a widely used set of performance measures developed and maintained by NCQA. These are used to drive improvement efforts surrounding best practices.

We want to help reduce your administrative burden in reporting HEDIS data to us each year during the HEDIS medical review season, so we have prepared the following list of CPT®, ICD 10 CM, and HCPCS codes. Adding these codes to your claims will help us identify additional information about each visit and improve the accuracy of reporting quality measures.

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

The codes in this chart identify weight assessment, counseling for nutrition, and physical activity. Member-collected biometric values (height, weight, BMI percentile) are eligible for use in the following ways:

Description	Code
<b>BMI Percentile</b>	<p><b>ICD-10-CM:</b></p> <p>Z68.51: Body mass index [BMI] pediatric, less than 5th percentile for age</p> <p>Z68.52: Body mass index [BMI] pediatric, 5th percentile to less than 85th percentile for age</p> <p>Z68.53: Body mass index [BMI] pediatric, 85th percentile to less than 95th percentile for age</p> <p>Z68.54: Body mass index [BMI] pediatric, greater than or equal to 95th percentile for age</p>
<b>Nutrition Counseling</b>	<p><b>CPT:</b> 97802, 97803, 97804</p> <p><b>HCPCS:</b></p> <p>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</p> <p>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 (two or more individuals), each 30 minutes</p> <p>G0447: Face-to-face behavioral counseling for obesity, 15 minutes</p> <p>S9449: Weight management classes, non-physician provider, per session</p> <p>S9452: Nutrition classes, non-physician provider, per session</p> <p>S9470: Nutritional counseling, dietitian visit</p>
<b>Physical Activity Counseling</b>	<p><b>CPT:</b> 99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395, 99461</p> <p><b>HCPCS:</b></p> <p>G0438: Annual wellness visit; includes a personalized prevention plan of service (PPS), initial visit</p> <p>G0439: Annual wellness visit, includes a personalized prevention plan of service (PPS), subsequent visit</p> <p>S0302: Completed early periodic screening diagnosis and treatment (EPSDT) service (list in addition to code for appropriate evaluation and management service)</p>

# Childhood Immunizations Status (CIS/CIS-E)

## Vaccines administered by their second birthday:

- DTaP (diphtheria, tetanus, pertussis): At least four vaccinations with different dates of service. Do not count a vaccination administered prior to 42 days after birth.
- IPV (inactivated polio vaccine): At least three vaccinations with different dates of service. Do not count a vaccination administered prior to 42 days after birth.
- MMR (measles, mumps, and rubella): Can only be given on or between the child's first and second birthdays.
- HiB (haemophilus influenza type b): At least three vaccinations with different dates of service. Do not count a vaccination administered prior to 42 days after birth.
- Hep B (hepatitis B): At least three vaccinations with different dates of service. One of the three vaccinations can be a newborn hepatitis B vaccination during the 8-day period that begins on the date of birth and ends seven days after the date of birth.
- VZV (herpes zoster zostavax): At least one vaccination with a date of service on or between the child's first and second birthdays.
- PCV (pneumococcal conjugate vaccine): At least four vaccinations with different dates of service. Do not count a vaccination administered prior to 42 days after birth.
- Hep A (hepatitis A): At least one vaccination with a date of service on or between the child's first and second birthdays.
- RV (rotavirus): At least two doses of the two-dose rotavirus vaccine on different dates of service:
  - **or** at least three doses of the three-dose rotavirus vaccine different dates of service.
  - **or** at least one dose of the two-dose rotavirus vaccine and at least two doses of the three-dose rotavirus vaccine all on different dates of service. Do not count a vaccination administered prior to 42 days after birth.
- Flu (influenza): At least two influenza vaccinations with different dates of service on or before the child's second birthday. Do not count a vaccination administered prior to 180 days after birth:
  - An influenza vaccination recommended for children 2 years and older administered on the child's second birthday meets criteria for one of the two required vaccinations.

## Codes to identify vaccine procedures:

Description	Code
Diphtheria, Tetanus, Pertussis (DTaP)	CPT: 90697, 90698, 90700, 90723
Inactivated Polio Vaccine (IPV)	CPT: 90697, 90698, 90713, 90723
Measles, Mumps, and Rubella (MMR)	CPT: 90707, 90710
Haemophilus Influenzae Type B (HiB)	CPT: 90644, 90647, 90648, 90697, 90698, 90748
Varicella Zoster (VZV)	CPT: 90710, 90716
Hepatitis B (HBV)	CPT: 90697, 90723, 90740, 90744, 90747, 90748
Pneumococcal Conjugate (PCV)	CPT: 90670, 90671
Hepatitis A	CPT: 90633
Rotavirus (RV): Two dose schedule	CPT: 90681
Rotavirus (RV): Three dose schedule	CPT: 90680
Influenza	CPT: 90655, 90657, 90661, 90673, 90674, 90685, 90686, 90687, 90688, 90689 LAIV: 90660, 90672

## Immunizations for Adolescents (IMA/IMA-E)

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 ninth and 13th birthday or two doses of HPV with at least 146 days between first and second dose



### Codes to identify vaccine procedures:

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

## Lead Screening in Children (LSC) Prior to Second Birthday

Description	Code
Lead Tests	CPT: 83655
Health and Behavior Assessment or Intervention	CPT: 96156, 96158, 96159, 96164, 96165, 96167, 96168, 96170, 96171

## Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM-E)

Description	Code
Cholesterol Lab Test	CPT: 82465, 83718, 83722, 84478
Glucose Lab Test	CPT: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951
HbA1c Lab Test	CPT: 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)

Description	Code
Psychosocial Care	<p><b>CPT:</b> 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90846, 90847, 90849, 90853, 90875, 90876, 90880</p> <p><b>HCPCS:</b></p> <p>G0176: Activity therapy, such as music, dance, art or play therapies not for recreation, related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more)</p> <p>G0177: Training and educational services related to the care and treatment of patient's disabling mental health problems per session (45 minutes or more)</p> <p>G0409: Social work and psychological services, directly relating to or furthering the patient's rehabilitation goals, each 15 minutes, face to face; individual (services provided by a CORF qualified social worker or psychologist in a CORF)</p> <p>G0410: Group psychotherapy other than of a multiple-family group, in a partial hospitalization setting, approximately 45 to 50 minutes</p> <p>G0411: Interactive group psychotherapy, in a partial hospitalization setting, approximately 45 to 50 minutes</p> <p>H0004: Behavioral health counseling and therapy, per 15 minutes</p> <p>H0035: Mental health partial hospitalization, treatment, less than 24 hours</p> <p>H0036: Community psychiatric supportive treatment, face-to-face, per 15 minutes</p> <p>H0037: Community psychiatric supportive treatment program, per diem</p> <p>H0038: Self-help/peer services, per 15 minutes H0039: Assertive community treatment, face to face, per 15 minutes</p> <p>H0040: Assertive community treatment program, per diem</p> <p>H2000: Comprehensive multidisciplinary evaluation</p> <p>H2001: Rehabilitation program, per half day</p> <p>H2011: Crisis intervention service, per 15 minutes</p> <p>H2012: Behavioral health day treatment, per hour</p> <p>H2013: Psychiatric health facility service, per diem H2014: Skills training and development, per 15 minutes</p> <p>H2017: Psychosocial rehabilitation services, per 15 minutes</p> <p>H2018: Psychosocial rehabilitation services, per diem</p> <p>H2019: Therapeutic behavioral services, per 15 minutes</p> <p>H2020: Therapeutic behavioral services, per diem</p> <p>S0201: Partial hospitalization services, less than 24 hours, per diem</p> <p>S9480: Intensive outpatient psychiatric services, per diem</p> <p>S9484: Crisis intervention mental health services, per hour</p> <p>S9485: Crisis intervention mental health services, per diem</p>

## Topical Fluoride for Children (TFC)

Description	Code
Application of Fluoride Varnish	<b>CPT:</b> 99188



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 at [ama-assn.org](https://www.ama-assn.org).

