

HEDIS Prenatal and Postpartum Care Coding Bulletin: Electronic Clinical Data Systems

West Virginia | Mountain Health Trust

HEDIS® is a widely used set of performance measures developed and maintained by NCQA. These are used to drive improvement efforts surrounding best practices.

The HEDIS quality measures reported using the Electronic Clinical Data Systems (ECDS) inspire innovative use of electronic clinical data to document high-quality patient care that demonstrates commitment to evidence-based practices. Organizations that report HEDIS using ECDS encourage the electronic exchange of the information needed to provide high-quality services, ensuring that the information reaches the right people at the right time:

- ECDS reporting is part of the National Committee for Quality Assurance's (NCQA) larger strategy to enable a digital quality system and is aligned with the industry's move to digital measures.
- The ECDS reporting standard provides a method to collect and report structured electronic clinical data for HEDIS quality measurement and improvement.
- According to the NCQA, the HEDIS hybrid data collection (medical record collection) will be phased-out in the coming years.
- Health plans and healthcare providers will need to take advantage of electronic data streams to ensure accurate reporting of measures that require data not typically found in a claim.
- CPT® Category II codes can be used for performance measurement. **The use of the CPT II decreases the need for record abstraction and chart review.**
- CVX codes (vaccine administered code set) represent the type of product used in an immunization. Every immunization that used a given type of product will have the same CVX, regardless of who received it.
- Logical Observation Identifiers Names and Codes (LOINC) codes and SNOMED codes (supports the development of comprehensive high-quality clinical content in electronic health records) do not appear on claims and are quickly becoming vital to HEDIS reporting, especially for ECDS measures:
 - LOINC codes — while typically associated with lab data, there are several behavioral health screenings that can only be represented by LOINC codes for the purposes of HEDIS reporting and can be extracted from electronic medical record (EMR) systems.
 - SNOMED codes represent both diagnoses and procedures as well as clinical findings. SNOMED codes are the industry standard for classifying clinical data in EMR systems and can be extracted from EMR systems.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

- Because LOINC codes and SNOMED codes can only be obtained through supplemental data feeds, it is important that health plans and the provider community embrace the sharing of these EMR data to ensure the quality of care our members are receiving.

How can we help?

- Utilize this bulletin as a reference to understand the ECDS measures and the coding associated with electronic data transmission.
- Contact your health plan representative to establish an electronic data transfer with the plan if your organization does not already have one.
- Make full use of CPT II codes to submit care quality findings, many HEDIS gaps could be closed via claims if CPT II codes were fully utilized.
- Offering current *Clinical Practice Guidelines* on our provider self-service website.
- Members may be eligible for transportation assistance at no cost:
 - For transportation benefits, members can contact Member Services for help with getting a ride to nonemergent medically necessary appointments and treatments.

Our Supplemental Data team is here to help.

For additional support in submitting supplemental data for ECDS measures, send inquiries to supplementaldata@wellpoint.com.

Helpful tips:

- Educate expectant mothers on the importance of vaccines during pregnancy. If you do not have flu vaccines available, refer the patient to another healthcare provider, pharmacy, or community vaccination center.
- Educate expectant mothers that influenza can result in serious illness, including a higher chance of progressing to pneumonia, when it occurs during the antepartum or postpartum period.
- Educate mother on how the flu vaccine will protect both her and her baby.
- Educate mothers on passive immunity the maternal immunization will pass on to their newborns.
- The Tdap vaccine is recommended in the third trimester as this will boost the neonatal antibody levels in the baby. Babies whose mothers had the Tdap vaccine during pregnancy are better protected against whooping cough during the first two months of life.
- Explain to expectant mothers that the Tdap vaccine will protect them and their baby from pertussis and its life-threatening complications.

- Optimize your charting system to prompt your providers to perform any of the specified prenatal depression screening tools at the first prenatal visit as part of your standard initial prenatal exam.
- Whenever possible, depression screening and treatment are culturally appropriate and offered in the patient’s first language.
- Members of the care team understand the importance of depression screening and to recognize the risk factors for depression in pregnancy.
- Medication:
 - Advise moms even when pregnant that they may be able to take medication to treat their depression.
 - Advise moms even when breastfeeding that they may be able to take medication to treat their depression.
- Have options for community counselors and psychiatry available for patients interested in that option if screened positive. Advise that these organizations offer confidential help.

Prenatal Immunization Status (PRS-E)

This measure discusses the percentage of deliveries in the measurement period (January 1 to December 31) in which women had received influenza and tetanus, diphtheria toxoids, and acellular pertussis (Tdap) vaccinations.

Description	CPT/CVX/SNOMED CT
37 Weeks Gestation	SNOMED CT 43697006: Gestation period, 37 weeks (finding)
38 Weeks Gestation	SNOMED CT 13798002: Gestation period, 38 weeks (finding)
39 Weeks Gestation	SNOMED CT 80487005: Gestation period, 39 weeks (finding)
40 Weeks Gestation	SNOMED CT 46230007: Gestation period, 40 weeks (finding)
41 Weeks Gestation	SNOMED CT 63503002: Gestation period, 41 weeks (finding)
42 Weeks Gestation	SNOMED CT 36428009: Gestation period, 42 weeks (finding)
Adult Influenza Immunization	CVX 88: influenza virus vaccine, unspecified formulation 135: influenza, high dose seasonal, preservative-free 140: Influenza, seasonal, injectable, preservative free 141: Influenza, seasonal, injectable 144: seasonal influenza, intradermal, preservative free 150: Influenza, injectable, quadrivalent, preservative free

	<p>153: Influenza, injectable, Madin Darby Canine Kidney, preservative free</p> <p>155: Seasonal, trivalent, recombinant, injectable influenza vaccine, preservative free</p> <p>158: influenza, injectable, quadrivalent, contains preservative</p> <p>166: influenza, intradermal, quadrivalent, preservative free, injectable</p> <p>168: Seasonal trivalent influenza vaccine, adjuvanted, preservative free</p> <p>171: Influenza, injectable, Madin Darby Canine Kidney, preservative free, quadrivalent</p> <p>185: Seasonal, quadrivalent, recombinant, injectable influenza vaccine, preservative free</p> <p>186: Influenza, injectable, Madin Darby Canine Kidney, quadrivalent with preservative</p> <p>197: influenza, high-dose seasonal, quadrivalent, 0.7mL dose, preservative free</p> <p>205: influenza, seasonal vaccine, quadrivalent, adjuvanted, 0.5mL dose, preservative free</p>
<p>Adult Influenza Vaccine Procedure</p>	<p>CPT 90630, 90653, 90654, 90656, 90658, 90661, 90662, 90673, 90674, 90682, 90686, 90688, 90689, 90694, 90756</p> <p>SNOMED CT 86198006: Administration of vaccine product containing only Influenza virus antigen (procedure)</p>
<p>Tdap Vaccine Procedure</p>	<p>CPT 90715</p> <p>SNOMED CT 390846000: Administration of booster dose of vaccine product containing only acellular Bordetella pertussis and Clostridium tetani and Corynebacterium diphtheriae antigens (procedure) 412755006: Administration of first dose of vaccine product containing only acellular Bordetella pertussis and Clostridium tetani and Corynebacterium diphtheriae antigens (procedure) 412756007: Administration of second dose of vaccine product containing only acellular Bordetella pertussis and Clostridium tetani and Corynebacterium diphtheriae antigens (procedure) 412757003: Administration of third dose of vaccine product containing only acellular Bordetella pertussis and Clostridium tetani and Corynebacterium diphtheriae antigens (procedure)</p>

	<p>428251000124104: Tetanus, diphtheria, and acellular pertussis vaccination (procedure)</p> <p>571571000119105: Administration of vaccine product containing only acellular Bordetella pertussis and Clostridium tetani and Corynebacterium diphtheriae antigens (procedure)</p>
CDC Race and Ethnicity	<p>1002-5: American Indian or Alaska Native</p> <p>2028-9: Asian</p> <p>2054-5: Black or African American</p> <p>2076-8: Native Hawaiian or Other Pacific Islander</p> <p>2106-3: White</p> <p>2135-2: Hispanic or Latino</p> <p>2186-5: Not Hispanic or Latino</p>

Note: The codes listed are informational only; this information does not guarantee benefit coverage or reimbursement.

Prenatal Depression Screening and Follow-up (PND-E)

This measure discusses the percentage of deliveries in which members were screened for clinical depression while pregnant and, if screened positive, received follow-up care during the measurement year:

- *Depression Screening* — The percentage of deliveries in which members were screened for clinical depression during pregnancy using a standardized instrument.
- *Follow-up on Positive Screen* — The percentage of deliveries in which members received follow-up care within 30 days of a positive depression screen finding.

Description	CPT/SNOMED CT
37 weeks gestation	SNOMED CT 43697006: Gestation period, 37 weeks (finding)
38 weeks gestation	SNOMED CT 13798002: Gestation period, 38 weeks (finding)
39 weeks gestation	SNOMED CT 80487005: Gestation period, 39 weeks (finding)
40 weeks gestation	SNOMED CT 46230007: Gestation period, 40 weeks (finding)
41 weeks gestation	SNOMED CT 63503002: Gestation period, 41 weeks (finding)
42 weeks gestation	SNOMED CT 36428009: Gestation period, 42 weeks (finding)

Description	CPT/SNOMED CT
<p>Weeks of Gestation Less Than 37</p>	<p>SNOMED CT</p> <p>931004: Gestation period, 9 weeks (finding) 6678005: Gestation period, 15 weeks (finding) 15633004: Gestation period, 16 weeks (finding) 23464008: Gestation period, 20 weeks (finding) 25026004: Gestation period, 18 weeks (finding) 26690008: Gestation period, 8 weeks (finding) 37005007: Gestation period, 5 weeks (finding) 38039008: Gestation period, 10 weeks (finding) 41438001: Gestation period, 21 weeks (finding) 44398003: Gestation period, 4 weeks (finding) 46906003: Gestation period, 27 weeks (finding) 48688005: Gestation period, 26 weeks (finding) 50367001: Gestation period, 11 weeks (finding) 54318006: Gestation period, 19 weeks (finding) 57907009: Gestation period, 36 weeks (finding) 62333002: Gestation period, 13 weeks (finding) 63110000: Gestation period, 7 weeks (finding) 65035007: Gestation period, 22 weeks (finding) 65683006: Gestation period, 17 weeks (finding) 72544005: Gestation period, 25 weeks (finding) 72846000: Gestation period, 14 weeks (finding) 74952004: Gestation period, 3 weeks (finding) 79992004: Gestation period, 12 weeks (finding) 82118009: Gestation period, 2 weeks (finding) 86801005: Gestation period, 6 weeks (finding) 86883006: Gestation period, 23 weeks (finding) 87178007: Gestation period, 1 week (finding) 313178001: Gestation less than 24 weeks (finding) 313179009: Gestation period, 24 weeks (finding) 428058009: Gestation less than 9 weeks (finding) 428566005: Gestation less than 20 weeks (finding) 428567001: Gestation 14 - 20 weeks (finding) 428930004: Gestation 9- 13 weeks (finding)</p>
<p>Depression Case Management Encounter</p>	<p>CPT</p> <p>99366, 99492, 99493, 99494</p> <p>HCPCS</p> <p>T1016: Case management, each 15 minutes T1017: Targeted case management, each 15 minutes T2022: Case management, per month T2023: Targeted case management; per month</p> <p>SNOMED CT</p>

Description	CPT/SNOMED CT
	<p>182832007: Procedure related to management of drug administration (procedure)</p> <p>225333008: Behavior management (regime/therapy)</p> <p>385828006: Health promotion management (procedure)</p> <p>386230005: Case management (procedure)</p> <p>409022004: Dispensing medication management (procedure)</p> <p>410216003: Communication care management (procedure)</p> <p>410219005: Personal care management (procedure)</p> <p>410328009: Coping skills case management (procedure)</p> <p>410335001: Exercises case management (procedure)</p> <p>410346003: Medication action/side effects case management (procedure)</p> <p>410347007: Medication set-up case management (procedure)</p> <p>410351009: Relaxation/breathing techniques case management (procedure)</p> <p>410352002: Rest/sleep case management (procedure)</p> <p>410353007: Safety case management (procedure)</p> <p>410354001: Screening case management (procedure)</p> <p>410356004: Signs/symptoms-mental/emotional case management (procedure)</p> <p>410360001: Spiritual care case management (procedure)</p> <p>410363004: Support group case management (procedure)</p> <p>410364005: Support system case management (procedure)</p> <p>410366007: Wellness case management (procedure)</p> <p>416341003: Case management started (situation)</p> <p>416584001: Case management ended (situation)</p> <p>424490002: Medication prescription case management (procedure)</p> <p>425604002: Case management follow up (procedure)</p> <p>737850002: Day care case management (procedure)</p> <p>621561000124106: Psychiatric case management (procedure)</p> <p>661051000124109: Education about Department of Veterans Affairs Military2VA Case Management Program (procedure)</p> <p>662081000124106: Assistance with application for Department of Veterans Affairs Military2VA Case Management Program (procedure)</p> <p>662541000124107: Evaluation of eligibility for Department of Veterans Affairs Military2VA Case Management Program (procedure)</p>
Symptoms of Depression	<p>SNOMED CT</p> <p>394924000: Symptoms of depression (finding)</p> <p>788976000: Leaden paralysis (finding)</p>
CDC Race and Ethnicity	<p>1002-5: American Indian or Alaska Native</p> <p>2028-9: Asian</p> <p>2054-5: Black or African American</p> <p>2076-8: Native Hawaiian or Other Pacific Islander</p>

Description	CPT/SNOMED CT	
	2106-3: White 2135-2: Hispanic or Latino 2186-5: Not Hispanic or Latino	
Instruments for adolescents (≤ 17 years)	Total score LOINC codes	Positive finding
<i>Patient Health Questionnaire (PHQ-9)</i> [®]	44261-6	Total score ≥ 10
<i>Patient Health Questionnaire Modified for Teens (PHQ- 9M)</i> [®]	89204-2	Total score ≥ 10
<i>Patient Health Questionnaire-2 (PHQ-2)</i> ^{®1}	55758-7	Total score ≥ 3
<i>Beck Depression Inventory-Fast Screen (BDI-FS)</i> ^{®1,2}	89208-3	Total score ≥ 8
<i>Center for Epidemiologic Studies Depression Scale- Revised (CESD-R)</i>	89205-9	Total score ≥ 17
<i>Edinburgh Postnatal Depression Scale (EPDS)</i>	71354-5	Total score ≥ 10
<i>PROMIS Depression</i>	71965-8	Total score (T score) ≥ 60

Instruments for adults (18+ years)	Total score LOINC codes	Positive finding
<i>Patient Health Questionnaire (PHQ-9)</i> [®]	44261-6	Total score ≥ 10
<i>Patient Health Questionnaire-2 (PHQ-2)</i> ^{®1}	55758-7	Total score ≥ 3
<i>Beck Depression Inventory-Fast Screen (BDI-FS)</i> ^{®1,2}	89208-3	Total score ≥ 8
<i>Beck Depression Inventory (BDI-II)</i>	89209-1	Total score ≥ 20
<i>Center for Epidemiologic Studies Depression Scale- Revised (CESD-R)</i>	89205-9	Total score ≥ 17
<i>Duke Anxiety-Depression Scale (DUKE-AD)</i> ^{®2}	90853-3	Total score ≥ 30
<i>Edinburgh Postnatal Depression Scale (EPDS)</i>	71354-5	Total score ≥ 10
<i>My Mood Monitor (M-3)</i> [®]	71777-7	Total score ≥ 5
<i>PROMIS Depression</i>	71965-8	Total score (T score) ≥ 60
<i>Clinically Useful Depression Outcome Scale (CUDOS)</i>	90221-3	Total score ≥ 31

Note: The codes listed are informational only; this information does not guarantee benefit coverage or reimbursement.

* There are many approved NCQA codes used to identify the services included in the measures listed below. The following are just a few of the approved codes. See the NCQA website for a complete list: <https://ncqa.org/>.

A standard assessment instrument that has been normalized and validated for the appropriate patient population. Eligible screening instruments with thresholds for positive findings include:

- 1 Brief screening instrument. All other instruments are full-length.
- 2 Proprietary; may be cost or licensing requirement associated with use.

Postpartum Depression Screening and Follow-up (PDS-E)

This measure discusses the percentage of deliveries in which members were screened for clinical depression during the postpartum period, and if screened positive, received follow-up care during the measurement year:

- *Depression Screening* — The percentage of deliveries in which members were screened for clinical depression using a standardized instrument during the postpartum period (7-84 days following the delivery date).
- *Follow-up on Positive Screen* — The percentage of deliveries in which members received follow-up care within 30 days of a positive depression screen finding (31 total days).

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Description	CPT/SNOMED CT/HCPCS
Depression Case Management Encounter	HCPCS
	T1016: Case management, each 15 minutes
	T1017: Targeted case management, each 15 minutes
	SNOMED CT
	182832007: Procedure related to management of drug administration (procedure)
	225333008: Behavior management (regime/therapy)
	385828006: Health promotion management (procedure)
	386230005: Case management (procedure)
	409022004: Dispensing medication management (procedure)
	410216003: Communication care management (procedure)
	410219005: Personal care management (procedure)
	410328009: Coping skills case management (procedure)
	410335001: Exercises case management (procedure)
	410346003: Medication action/side effects case management (procedure)
	410347007: Medication set-up case management (procedure)
	410351009: Relaxation/breathing techniques case management (procedure)
	410352002: Rest/sleep case management (procedure)
	410353007: Safety case management (procedure)
	410354001: Screening case management (procedure)
	410356004: Signs/symptoms-mental/emotional case management (procedure)
410360001: Spiritual care case management (procedure)	
410363004: Support group case management (procedure)	

Description	CPT/SNOMED CT/HCPCS
	410364005: Support system case management (procedure) 410366007: Wellness case management (procedure) 416341003: Case management started (situation) 416584001: Case management ended (situation) 424490002: Medication prescription case management (procedure) 425604002: Case management follow up (procedure) 737850002: Day care case management (procedure) 621561000124106: Psychiatric case management (procedure) 661051000124109: Education about Department of Veterans Affairs Military2VA Case Management Program (procedure) 662081000124106: Assistance with application for Department of Veterans Affairs Military2VA Case Management Program (procedure) 662541000124107: Evaluation of eligibility for Department of Veterans Affairs Military2VA Case Management Program (procedure)
Symptoms of Depression	SNOMED CT 394924000: Symptoms of depression (finding) 788976000: Leaden paralysis (finding)
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 1 Brief screening instrument. All other instruments are full-length.
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<i>Center for Epidemiologic Studies Depression Scale- Revised (CESD-R)</i>	89205-9	Total score ≥ 17
<i>Edinburgh Postnatal Depression Scale (EPDS)</i>	71354-5	Total score ≥ 10
<i>PROMIS Depression</i>	71965-8	Total score (T score) ≥ 60

Instruments for adults (18+ years)	Total score LOINC codes	Positive finding
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<i>Patient Health Questionnaire-2 (PHQ-2)</i> ^{®1}	55758-7	Total score ≥ 3
<i>Beck Depression Inventory-Fast Screen (BDI-FS)</i> ^{®1,2}	89208-3	Total score ≥ 8
<i>Beck Depression Inventory (BDI-II)</i>	89209-1	Total score ≥ 20
<i>Center for Epidemiologic Studies Depression Scale- Revised (CESD-R)</i>	89205-9	Total score ≥ 17
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Patient care opportunities

You can find patient care opportunities within the **Patient360** application located on Availity Essentials **Payer Spaces**. To access the **Patient360** application, you must have the *Patient360* role assignment. From Availity's home page, select **Payer Spaces**, then choose the health plan from the menu. Choose the **Patient360** tile from the **Payer Space Applications** menu and complete the required information on the screen. Gaps in care are located in the *Active Alerts* section of the *Member Summary*.