

HEDIS[®] Hybrid Measure Pocket Guide

This Pocket guide is designed to offer quick tips on each of the Hybrid measures to improve your HEDIS® scores, P4P payments, and reduce the number of charts that we may need to collect from you. Many of the tips are a reminder that you can get credit for services on most measures during Telehealth visits if properly documented and coded. Please use the HEDIS® Resources on the L.A. Care website for detailed measure information and the commonly used codes.



in Children

lacare.org/providers/provider-resources/tools-toolkits/hedis-resources/

| BPD Blood Pressure Control for Patients With Diabetes | Blood pressure readings taken by the member on the day of the Telehealth visit are acceptable. If initial BP reading is 140/90 or higher, repeat BP. May take multiple BP readings on same day. When reporting these - take lowest systolic and lowest diastolic reading as the representative BP reading on this visit. Do not use ranges and thresholds in documenting BP readings. Use appropriate CPT codes to capture data. |
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| CBP Controlling High Blood Pressure | Blood pressure readings taken by the member on the day of the Telehealth visit are acceptable. If initial BP reading is 140/90 or higher, repeat BP. May take multiple BP readings on same day. When reporting these - take lowest systolic and lowest diastolic reading as the representative BP reading on this visit. Use appropriate CPT codes to capture data. |
| GSD Glycemic Status Assessment for Patients with Diabetes | Re-check glycemic HbA1c later in the year if it is high. Monitor and document glucose level data in the progress notes. Include GMI results collected by member in the medical record. Aim for glycemic HbA1c or glucose management indicator (GMI) of <8.0%. When documenting glycemic HbA1c test or GMI value in progress notes, include date and result. Use appropriate CPT codes to capture data. |
| LSC Lead Screening | Children must test for lead poisoning prior their 2nd birthday. Perform one or more capillary or venous lead blood test. |

Use appropriate CPT codes to capture data.

| LSC Lead Screening in Children | Children must test for lead poisoning prior their 2nd birthday. Perform one or more capillary or venous lead blood test. Use appropriate CPT codes to capture data. |
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| COA Care of Older Adults | Perform Annual Wellness Exam during Telehealth visit. Medication Review and Assess Functional Status. There must be a Medication List in the medical record. Use appropriate CPT codes to capture data. |
| PPC Prenatal and Postpartum Care | Prenatal/Postpartum visits must only be provided by PCP, OBGYN or CNM. Visits must have name, signature and provider type. A diagnosis of Pregnancy is required if initial prenatal visit is performed by PCP. For post partum visit, document date of delivery. Evaluation of weight, BP, breast and abdomen must be documented in post partum visits. Use appropriate CPT codes to capture data. |
| TRC Transitions of Care | Include date received and provider signature when acknowledging receipt of admission notification and discharge summary from hospital/IPA. For follow up visit after discharge from hospital, documentation must reference to hospitalization, admission or inpatient stay. Include current medication list and discharge meds when reconciling medications. Medication reconciliation may be done by prescribing practitioner, clinical phamacist, physician assistant or registered nurse. Medication reconciliation <i>does not</i> require member to be present. Use appropriate CPT codes to capture data. |
| WCC Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents | Member/Parent reported biometrics like HT and WT BMI% are allowed with telehealth visits and should be noted on the day of the visit. BMI percentile can be calculated or plotted on the member's BMI "age-growth" chart. Anticipatory Guidance for nutrition and physical activity are allowed in sick visits. Use appropriate CPT codes to capture data. |