



Measure	CPT/CPT CATEGORY II/HCPCS/ICD-10 Code(s)	Description	Exclusions
Breast Cancer Screening	CPT/HCPCS codes: 77061-77063, 77065 -77067	Indicates whether a female age 52 - 74 had a mammogram done from 27 months prior to the measurement period to the end of the measurement period. Note: The Breast Cancer Screening age range will expand to 42 – 74. The updated measure with the expanded age range will be available for viewing. Providers will be notified in advance about the effective date for the updated age range for this measure.	Bilateral mastectomy ICD-10 code: Z90.13 Two unilateral mastectomies ICD-10 codes: Z90.11 AND Z90.12 Unilateral mastectomy with bilateral modifier CPT codes: 19180, 19200, 19220, 19240, 19303-19307 Patients who used hospice services anytime during the measurement year. Note: See our Advanced Illness and Frailty Guide for coding assistance if a patient may meet criteria for measure exclusions.
CAD Statin Therapy	At least one high or moderate intensity statin dispensing event during the measurement year.	The percentage of females age 40 - 75 and males age 21 - 75 who were identified as having atherosclerotic cardiovascular disease (ASCVD) and were dispensed at least one high-intensity or moderate-intensity statin medication during the measurement year.	Patients with a diagnosis of pregnancy (ICD-10 codes: 0000-09989, 09A*, Z037*, Z331-Z3493, Z36) during the measurement year or year prior. Patients who had in vitro fertilization (HCPCS Procedure Codes: S4015, S4016, S4018, S4020, S4021) performed during the measurement year or year prior. Patients who had a prescription for clomiphene during the measurement year or year prior. Patients with evidence of ESRD (CPT Procedure Codes: 90935, 90937, 90940, 90945, 90947, 90997, 90999, 99512 OR HCPCS Procedure Codes: G0257, S9339 OR ICD-10 codes: M60.80, N18.5, N18.6, Z911.5, Z99.2) during the measurement year or year prior. Patients with a diagnosis of cirrhosis (ICD-10 codes: K70.30, K70.31, K71.7, K74.3-K74.5, K74.60, K74.69, P78.81) during the measurement year or year prior. Patients with diagnosis of myalgia, myositis, myopathy or rhabdomyolysis (ICD-10 codes: G72.0, G72.2, G72.9, M60.80, M62.82, M79.10) during the measurement year or year prior. Patients with hospice services (CPT Procedure Codes: 99377, 99378) during the measurement year. Patients who used hospice services anytime during the measurement year and excludes patients receiving palliative care during the measurement year. Note: See our Advanced Illness and Frailty Guide for coding assistance if a patient may meet criteria for measure exclusions.
Colorectal Cancer Screening	Colorectal cancer screening tests include the following: a fecal occult blood test during the measurement year, a flexible sigmoidoscopy or CT colonography during the measurement year or the previous four years, a stool DNA (sDNA) with FIT test during the measurement year or previous two years, or a colonoscopy during the measurement year or the previous nine years. Fecal Occult Blood Test (FOBT) CPT/HCPCS codes: 82270, 82274, G0328 Flexible Sigmoidoscopy CPT/HCPCS codes: 45330-45335, 45337, 45338, 45340-45342, 45346, 45347, 45349, 45350, G0104 CT Colonography CPT code: 74261-74263 Stool DNA (sDNA) with FIT test CPT/HCPCS code: 0464U, 81528 Colonoscopy CPT/HCPCS codes: 44388-44392, 44394, 44401-44408, 45378-45382, 45384-45386, 45388-45393, 45398, G0105, G0121	Indicates whether a patient, age 45 - 75, had appropriate screening for colorectal cancer.	Colorectal Cancer ICD-10 codes: C18.0-C18.9, C19, C20, C21.2, C21.8, C78.5, Z85.038, Z85.048 Total Colectomy CPT codes: 44150-44153, 44155-44158, 44210-44212 Patients with hospice service during the measurement year or dispensed dementia meds during the measurement year or year prior. Note: See our Advanced Illness and Frailty Guide for coding assistance if a patient may meet criteria for measure exclusions. Patients who used hospice services anytime during the measurement year and excludes patients receiving palliative care during the measurement year.



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Controlling High Blood Pressure (BP)	Systolic CPT codes: 3074F, 3075F AND Diastolic CPT codes: 3078F, 3079F The BP reading must be on or after the visit with the 2nd diagnosis of hypertension.	Patients age 18–85 who had a diagnosis of hypertension (HTN) and whose blood pressure was adequately controlled (<140/90) during the measurement year. Measurements can be obtained via telehealth, telemedicine, virtual, e-visit, telephone encounter or from a home log brought in by the patient during a regular in-person visit.	Patients with evidence of end-stage renal disease (ESRD) or a kidney transplant on or prior to December 31 of the measurement year. Documentation in the medical record must include a dated note including evidence of ESRD, kidney transplant or dialysis. All patients with a diagnosis of pregnancy during the measurement year. All patients who had a non-acute inpatient stay during the measurement year. Also excludes all patients with hospice services during the measurement year and excludes patients receiving palliative care during the measurement year. Patients who used hospice services anytime during the measurement year. Note: See our Advanced Illness and Frailty Guide for coding assistance if a patient may meet criteria for measure exclusions.
Diabetes Eye Exam	Billed by an optometrist or ophthalmologist CPT codes: 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92201, 92202, 92230, 92235, 92250, 99203-99205, 99213-99215, 99242-99245 HCPCS codes: S0620, S0621, S3000 Billed by any provider type during each measurement year. CPT codes: 2022F, 2023F, 2024F, 2025F, 2026F, 2033F, 3072F, 92137, 92227-92229	Indicates whether a patient with Type 1 or Type 2 diabetes age 18–75 had a dilated retinal eye exam performed by an optometrist or ophthalmologist in the current year OR a dilated retinal eye exam performed by an optometrist or ophthalmologist during the year prior to the measurement year, along with a diagnosis of uncomplicated diabetes. If any other diagnosis showing complicated diabetes is received, the test must be performed annually.	Excludes anyone with hospice services or palliative care services during the measurement year. Exclusions also include patients with two unilateral eye enucleations or one unilateral eye enucleation with a bilateral modifier. Note: See our Advanced Illness and Frailty Guide for coding assistance if a patient may meet criteria for measure exclusions.
Diabetes HbA1c Less Than 9%	CPT codes: 3044F, 3051F and 3052F or LOINC codes: 17856-6, 97506-0, 4548-4, 4549-2 with a Lab Result Numeric Value between 0 and 9 LOINC codes are not accepted on claim submissions. LOINC codes are typically sent electronically through HL7 messages.	Diabetic patients age 18–75 whose HbA1c level is less than 9%.	Excludes anyone with hospice services and patients receiving palliative care during the measurement year. Note: See our Advanced Illness and Frailty Guide for coding assistance if a patient may meet criteria for measure exclusions.
Follow-Up After Emergency Department Visit for People with Multiple High-Risk Chronic Conditions (FMC)	Outpatient/telehealth visit CPT and HCPCS codes: 98000-98016, 99201-99205, 99211-99215, 99242-99245, 99341, 99342, 99344, 99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99429, 99455, 99456, 99483, G0402, G0438, G0439, G0463, G0560, T1015 Telephone visit CPT codes: 99441-99443, 98966-98968 E-visit or virtual check-in CPT and HCPCS codes: 99421-99423, 98969-98972, 98980, 98981, 99444, 99457, 99458, G0071, G2010, G2012, G2061-G2063, G2250-G2252 Transitional care management services CPT codes: 99495, 99496 Case management visit CPT and HCPCS codes: 99366, T1016, T1017, T2022, T2023 Complex care management services CPT and HCPCS codes: 99439, 99487, 99489-99491, G0506 Observation visit CPT codes: 99217-99220 Substance use disorder services CPT and HCPCS codes: 99408, 99409, G0396, G0397, G0443, H0001, H0005, H0007, H0016, H0022, H0047, H0050, H2035, H2036, T1006, T1012 Domiciliary or rest home visit CPT codes: 99324-99328, 99334-99337	Identifies the percentage of Emergency Department (ED) visits for patients 18 years and older who have multiple high-risk chronic conditions who had a follow-up service on the date of the ED discharge or in the 7 days following discharge (8 total days).	Patients are excluded from the measure if they received hospice care during the measurement year, are deceased during the measurement year, or experienced an ED visit resulting in an inpatient stay on the day of the visit or within seven days after the ED visit.



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HEDIS OSW Osteoporosis Screening in Older Women	CPT/HCPCS codes: 76977, 77078, 77080, 77081, 77085	Indicates the percentage of women 65–75 years of age who received one or more screening tests on or after their 65th birthday.	Women who had a hospice service during the measurement year, frailty or advanced illness claim during the measurement year or one year prior. Women who had an encounter for osteoporosis therapy within 12 months prior to the index event date. Women who had a prescription for an osteoporosis drug within 12 months prior to the index event date. Women who used palliative services anytime during the intake period to the end of the measurement year. Note: See our Advanced Illness and Frailty Guide for coding assistance if a patient may meet criteria for measure exclusions.
Kidney Health Evaluation for Patients with Diabetes (KED)	<p>At least one eGFR during the measurement year AND At least one uACR during the measurement year identified by either of the following:</p> <ul style="list-style-type: none">• BOTH a quantitative urine albumin test AND a urine creatinine test with service dates four or less days apart OR• A uACR <p>eGFR CPT Codes: 80047, 80048, 80050, 80053, 80069, 82565 eGFR LOINC Codes: 50044-7, 50210-4, 50384-7, 62238-1, 69405-9, 70969-1, 77147-7, 94677-2, 98979-8, 98980-6</p> <p>Quantitative Urine Albumin Test CPT Code: 82043 Quantitative Urine Albumin Test LOINC Codes: 1754-1, 10058-5, 114957-5, 21059-1, 30003-8, 43605-5, 53530-2, 53531-0, 57369-1, 89999-7</p> <p>Urine Creatinine Test CPT Code: 82570 Urine Creatinine Test LOINC Codes: 20624-3, 2161-8, 35674-1, 39982-4, 57344-4, 57346-9, 58951-5</p> <p>uACR LOINC Codes: 13705-9, 14958-3, 14959-1, 30000-4, 44292-1, 59159-4, 76401-9, 77253-3, 77254-1, 89998-9, 9318-7</p> <p>LOINC codes are not accepted on claim submissions. LOINC codes are typically sent electronically through HL7 messages.</p>	Indicates the percentage of members 18–85 years of age with diabetes (Type 1 and Type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ratio (uACR), during the measurement year.	Patients 66 years and older with frailty and advanced illness or in hospice care during the measurement year. Patients who receive palliative care during the measurement year. Note: See our Advanced Illness and Frailty Guide for coding assistance if a patient may meet criteria for measure exclusions.
Medication Adherence for Cholesterol	Pharmacy claims	Patients age 18 or older who adhere to their prescribed drug therapy for statin cholesterol medications. Patients fill their prescriptions in the targeted drug class at least 80% or higher of the days prescribed in the measurement year.	Any patient diagnosed with end-stage renal disease (ESRD). Patients who used hospice services anytime during the measurement year. Dialysis coverage dates.



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Medication Adherence for Hypertension	Pharmacy claims	Patients age 18 or older who adhere to their prescribed drug therapy for renin angiotensin system (RAS) antagonists (angiotensin converting enzyme inhibitor (ACEI), angiotensin receptor blocker (ARB) or direct renin inhibitor medications). Qualifying "Blood Pressure medication" includes ACEI, an ARB, or a direct renin inhibitor drug. Patients must fill their prescriptions in the targeted drug class at least 80% or higher of the days prescribed in the measurement year.	Any patient diagnosed with end-stage renal disease (ESRD) N18.5, N18.6, Z99.2. Patients who used hospice services anytime during the measurement year. Dialysis coverage dates. One or more prescription claims for Sacubitril / Valsartan (Entresto).
Medication Adherence for Diabetes Medications	Pharmacy claims	Patients with Type 1 or Type 2 diabetes age 18 or older who adhere to their prescribed drug therapy across four classes of diabetes medications: biguanides, sulfonylureas, thiazolidinediones, and Dipeptidyl Peptidase (DPP)-IV Inhibitors. Patients must fill their prescriptions in the targeted drug class at least 80% or higher of the days prescribed in the measurement year.	Any patient diagnosed with end-stage renal disease (ESRD). Patients who used hospice services anytime during the measurement year. One or more prescriptions for insulin.
Medication Reconciliation Post Discharge	CPT/HCP/ICD-10 codes: 99483, 99495, 99496, 1111F Measure looks at any inpatient admission to hospital, nursing home, rehab, etc.	Patients 18 and older with an inpatient admission during the measurement year for whom medications were reconciled from the date of discharge through 30 days after discharge (31 days total) by a prescribing practitioner, clinical pharmacist or registered nurse. Only physicians and qualified healthcare providers (MD, DO, NP, etc.) can file TCM codes 99495/99496.	Patients who used hospice services anytime during the measurement year.
Statin Use in Persons with Diabetes	Pharmacy claims	Patients age 40–75 who have had two diabetes medication fills and have also received a statin or a statin combination fill in the measurement period.	Any patient diagnosed with End-Stage Renal Disease (ESRD) and any patients enrolled in hospice care at any time during the measurement period. Also, members with the following diagnosis code based conditions coded during the measurement period will be excluded: rhabdomyolysis, myopathy, pregnancy, lactation, liver disease, pre-diabetes and polycystic ovary syndrome. Patients who used hospice services anytime during the measurement year.

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ICD-10 is the 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD), a medical classification list by the World Health Organization (WHO).

New Measures for 2026:

- Follow-Up After Emergency Department Visit for People with Multiple High-Risk Chronic Conditions (FMC)
- HEDIS OSW Osteoporosis Screening in Older Women