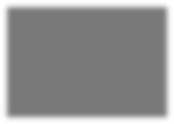
PUERTO RICO HEALTH INSURANCE ADMINISTRATION

ADMINISTRACIÓN DE SEGUROS DE SALUD DE PUERTO RICO



HEALTH CARE IMPROVEMENT PROGRAM CODE BOOK I GOVERNMENT HEALTH PLAN PROGRAM

JANUARY 1, 2023 – SEPTEMBER 30, 2025

Code Book for the first year

* 1. Scored Measures for 2021-2022

|  |  |
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| Readmissions rate | |
| Technical specifications | Plan all cause (PCR) metric: HEDIS MY 2020 & MY 2021, Volume 2 technical specifications. |
| PHQ-9 | |
| Definition | The PHQ-9 is a multipurpose instrument for screening,  diagnosing, monitoring and measuring the severity of depression. |
| Numerator | Patients in the denominator who were screened with a PHQ-9 test during the measurement period. |
| Denominator | All eligible population with the condition during the measurement year or period. |
| Continuous enrollment | N/A |
| Allowable gap | N/A |
| Description | Codes |
|  | CPT: 96127 Brief emotional/behav assmt  G8431: Screening for depression is documented as being positive and a follow-up plan is documented Short Description: Pos clin depres scrn f/u doc  G8510: Screening for depression is documented as negative, a follow-up plan is not required; Short description: Scr dep neg, no plan reqd  Other: Supplementary Data (test peformed by case managers among others) |
| Exclusions | N/A |
| Admissions/1000 | |
| Definition | Discharges for a principal diagnosis of selected conditions (see HCIP Manual) per 1,000 enrolled population.  Excludes obstetric admissions and transfers from other institutions. |
| Numerator | Discharges for members with a principal diagnosis (ICD-10-CM) which meet the criteria of the applicable initiative/condition |

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| Denominator | All eligible population with the condition during the measurement year or period. |
| Continuous enrollment | N/A |
| Allowable gap | N/A |
| Description | Codes |
| Revenue codes: See Appendix A |
| Exclusions | Exclude cases: With admission source for transferred from a different hospital or other health care facility UB04 Admission source - 2, 3)  With a point of origin code for transfer from a hospital, Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF), or other healthcare facility (Appendix A) (UB04 Point of Origin - 4,5,6) - With missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing), principal diagnosis (DX1=missing) |
| ED (Emergency room) Use/1000 | |
| Definition | For members 18 years of age and older, the number of observed emergency department (ED) visits during the measurement year.  \*ED visits for a principal diagnosis of selected conditions (see HCIP Manual). |
| Numerator | The number of all ED visits during the measurement year.  Count each visit to an ED once, regardless of the intensity or duration of the visit.  \*ED visits for a principal diagnosis of selected conditions (see HCIP Manual). |
| Denominator | All eligible population with the condition during the measurement year or period. |
| Continuous enrollment | N/A |
| Allowable gap | N/A |
| Description | Codes |

|  |  |
| --- | --- |
|  | CPT: 99281-99285, 99288  Place of service code: 23  Use the following reference:   * ED Visits from HEDIS Ambulatory Care (HEDIS MY 2020 & MY 2021, Volume 2 technical specifications). * ED Use ICD10 codes tab from the Code Book II Health Care Improvement Program |
| Exclusions | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications:  The measure does not include mental health or chemical  dependency services. Exclude visits for mental health or chemical dependency. Any of the following meet criteria:   * A principal diagnosis of mental health or chemical dependency (Mental and Behavioral Disorders Value Set). * Psychiatry (Psychiatry Value Set). * Electroconvulsive therapy (Electroconvulsive Therapy Value Set). |
| Emergency Room High Utilizers Initiative | |
| Definition | Overall emergency room utilization rate x 1,000 on identified population with 7 or more visits to the emergency room |
| Numerator | Total Number of ER Visits incurred by members with 7 or more ER Visits |
| Denominator | Total members with 7 or more ER Visits |
| Continuous enrollment | N/A |
| Allowable gap | N/A |
| Description | CPT: 99281-99285, 99288  Place of service code: 23 |

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| Exclusions | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications:  The measure does not include mental health or chemical  dependency services. Exclude visits for mental health or chemical dependency. Any of the following meet criteria:   * A principal diagnosis of mental health or chemical dependency (Mental and Behavioral Disorders Value Set). * Psychiatry (Psychiatry Value Set). * Electroconvulsive therapy (Electroconvulsive Therapy Value Set). |
| (OEV) • Oral Evaluation, Dental Services | |
| Technical specifications | DQA Measure Technical Specifications: Administrative Claims-Based Measures |
| (AAP) Adults’ Access to Preventive/Ambulatory Health Services | |
| Technical specifications | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications |
| (W30) Well-Child Visits First 30 months of Life | |
| Technical specifications | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications |
| (WCV) Child and Adolescent Well-Care Visits | |
| Technical specifications | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications |
| (BCS) Breast Cancer Screening | |
| Technical specifications | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications |
| (CCS) Cervical Cancer Screening | |
| Technical specifications | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications |
| (CDC) Comprehensive Diabetes Care | |
| Technical specifications | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications |
| Kidney Health Evaluation for Patients With Diabetes | |
| Technical specifications | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications |
| (CBP) Controlling High Blood Pressure | |
| Technical specifications | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications |

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| (FUH) Follow up after Hospitalization for Mental Illness (7 and 30 days) | |
| Technical specifications | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications |
| (PPC) Prenatal And Postpartum Care | |
|  | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications |
| (SSD) Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications | |
| Technical specifications | HEDIS MY 2020 & MY 2021, Volume 2 technical specifications |