

HEDIS TIP SHEET – WELL WOMEN MEASURES-MEDICAID

Key HEDIS Factors to Consider

Rates are calculated based on specific date criteria for when the service is performed/administered, as defined by NCQA.

- A. Postpartum care between 21 – 56 days after delivery
- B. Some measures require the service to be completed *anytime before 12/31 of the measurement year*.
For example: Breast Cancer & Cervical Cancer Screenings.

HEDIS data is collected through claims (administrative data) or *claims & medical record* data (Hybrid data).

- For claim (admin) data, procedure codes must reflect the actual service performed, general E&M codes *cannot* be counted for most measures (except Adult Access to Care & Prenatal Visits).

Ambulatory/ Preventive Health Services:

- Age Group: 20 and older
- Look back period: measurement year
- Requirements: had an ambulatory or preventive care visit during the measurement year.

CPT codes: Office/Outpatient: 99201-99205, 99211-99215, 99241-99245.

Breast Cancer Screening:

- Age Group: 50-64 years as of 12/31
- Look back period: measurement year and two years prior
- Requirements: at least one mammogram in the past two years. *Women who have had a bilateral mastectomy are exempt from this measure.*

CPT: 77055-77057

HCPCS: G0202, G0204, G0206

Cervical Cancer Screening:

- Age Group: 21 – 64 years as of 12/31
- Look back period: measurement year and up to 5 years prior
- Requirements: cervical cytology every 3 years for ages 21-64; cervical cytology/HPV co-testing every 5 years for ages 30-64 years (must occur within 4 days of each other).

CPT (age 21-64): 88141-88143, 88147, 88148, 88150, 88152-88155, 88164-88167, 88174, 88175. CPT (age 30-64): 87623, 87624, 87625

Chlamydia Screening:

- Age Group: 16 – 24 years as of 12/31
- Look back period: measurement year
- Requirements: women who were identified as sexually active and had at least one test for chlamydia per year.
Chlamydia test can be completed using any method, including urine test.

CPT: 87110, 87270, 87320, 87490-87492, 87810

Frequency of Prenatal Care:

- Age Group: none
- Look back period: measurement year and/or prior year
- Requirements: expected (recommended) number of prenatal care visits.
- Considerations: the recommended number of prenatal visits is determined by the gestational age and state of pregnancy at time of enrollment per ACOG.

Prenatal Care:

- Age Group: None
- Look back period: measurement year and/or prior year
- Requirements: timely prenatal care visits in the first trimester or within 42 days of member enrollment.

Postpartum Care:

- Age Group: None
- Look back period: live births between November 6th of the year prior and November 5th of the measurement year (11/6/prior year – 11/5/measurement year).
- Requirements: a postpartum visit on or between 21 and 56 days after delivery.