ATTACHMENT 19

HEALTH CARE IMPROVEMENT PROGRAM MANUAL 2023-2025

PUERTO RICO HEALTH INSURANCE ADMINISTRATION
ADMINISTRACIÓN DE SEGUROS DE SALUD DE PUERTO RICO

HEALTH CARE IMPROVEMENT PROGRAM

ATTACHMENT 19 – HEALTH CARE IMPROVEMENT PROGRAM MANUAL
GOVERNMENT HEALTH PLAN PROGRAM
JANUARY 1, 2023 –SEPTEMBER 30, 2025

Rev. October 28, 2022 Vol:1

ADMINISTRACION DE
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I. INTRODUCTION

The Puerto Rico Health Insurance Administration's (ASES, its acronym in Spanish) focus is on providing quality services that are patient-centered and aimed at increasing the use of screening, prevention, and appropriate delivery of care in a timely manner to all Medicaid, Children's Health Insurance Program (CHIP) and Medicare-Medicaid Dual Eligible (Platino) Enrollees in Puerto Rico. The Health Care Improvement Program (HCIP) is one of the tools developed by ASES to reach this goal for the Medicaid and Children's Health Insurance Program (CHIP) population.

The purpose of this manual is to provide the necessary guidelines for attaining the required performance indicators for each of the categories measured under the HCIP as specified and subject to revision by ASES in this Manual and incorporated in Section 12.5 of the Government Health Plan (GHP) Contract executed between the Contractor and ASES. As the HCIP guidelines and/or performance benchmarks are updated, ASES will share these changes with Contractors and update this manual.

ASES shall maintain a retention fund created by withheld amounts of the per member per month (PMPM) payment each month as part of the HCIP described in Section 22.4 of the Contract. The retained PMPM amount shall be associated with the HCIP initiatives outlined below:

1. Chronic Conditions Initiative
2. Healthy People Initiative
3. Emergency Room High Utilizers Initiative

ASES will disburse the retention fund to the Contractor according to compliance with each of the categories of performance indicators for each of the three (3) HCIP Initiatives specified in this Manual. The Clinical Operation Area will audit the results of the data in the timeframes stated in Section 22.4.2.2 of the Contract for the performance indicators in the above-named initiatives. This Manual describes, in detail, the requirements and the specific metrics for each initiative of the HCIP for the Contract period January 1, 2023 through September 30, 2025. The HCIP will start on the implementation date of the Contract and will be updated annually as GHP benchmarks are set and measures or metrics are revised accordingly.

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II. REPORTING TIMEFRAMES

The Contractor will submit a report for each quality initiative on a quarterly basis as established in the following table. The reporting templates will be provided by ASES and the Contractor must submit them through the ASES secure File Transfer Protocol (FTP) service.

Period	Claims Data: Incurred Service Time Period - Start	Claims Data: Incurred Service Time Period - End	Submission Due Date to ASES
Year 1			
Q1	January 1, 2022	December 31, 2022	April 30, 2023
Q2	April 1, 2022	March 31, 2023	July 30, 2023
Q3	July 1, 2022	June 30, 2023	October 30, 2023
Q4	October 1, 2022	September 30, 2023	January 30, 2024
Year 2			
Q1	January 1, 2023	December 31, 2023	April 30, 2024
Q2	April 1, 2023	March 31, 2024	July 30, 2024
Q3	July 1, 2023	June 30, 2024	October 30, 2024
Q4	October 1, 2023	September 30, 2024	January 30, 2025
Year 3			
Q1	January 1, 2024	December 31, 2024	April 30, 2025
Q2	April 1, 2024	March 31, 2025	July 30, 2025
Q3	July 1, 2024	June 30, 2025	October 30, 2025
Q4	October 1, 2024	September 30, 2025	January 30, 2026
Year 4*			
Q1	January 1, 2025	December 31, 2025	April 30, 2026
Q2	April 1, 2025	March 31, 2026	July 30, 2026
Q3	July 1, 2025	June 30, 2026	October 30, 2026
Q4	October 1, 2025	September 30, 2026	January 30, 2027

*Subject to extension or renovation of 4th year contract.

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III. EVALUATION & POINT DISTRIBUTION

The HCIP is divided into three categories:

1. Chronic Conditions Initiative
2. Healthy People Initiative
3. Emergency Room High Utilizers Initiative

There is a list of conditions, indicators and performance measures listed for the HCIP in Sections: VI.3, VI.4, and VI.5. These indicators and performance measures have been chosen by ASES for quarterly basis reporting and evaluation purposes for the HCIP. The MCOs will be notified of any changes to the selected indicators, the definition of improvement for each metric, and the corresponding point distribution for each fiscal year before the fiscal year begins.

Period	Claims Data: Incurred Service Time Period	Evaluation criteria
Year 1	Contractor GHP Benchmark: Report Submission.	
PY1	1/1/2022 – 12/31/2022	Report submission
PY2	4/1/2022 – 3/30/2023	Report submission
PY3	7/1/2022 – 6/30/2023	Report submission
PY4	10/1/2022 – 9/30/2023	Report submission
Year 2	Contractor GHP Benchmark: Any Quarter over Quarter Improvement	
PY1	1/1/2023 – 12/31/2023	Any Improvement
PY2	4/1/2023 – 3/30/2024	Any Improvement
PY3	7/1/2023 – 6/30/2024	Any Improvement
PY4	10/1/2023 – 9/30/2024	Any Improvement
Year 3	Contractor GHP Benchmark: To be provided by ASES	
PY1	1/1/2024 – 12/31/2024	Benchmarks
PY2	4/1/2024 – 3/30/2025	Benchmarks
PY3	7/1/2024 – 6/30/2025	Benchmarks
PY4	10/1/2024– 9/30/2025	Benchmarks
Year 4*	Contractor GHP Benchmark: To be provided by ASES	
P1	1/1/2025 – 12/31/2025	Benchmarks
P2	4/1/2025 – 3/30/2026	Benchmarks
P3	7/1/2025 – 6/30/2026	Benchmarks
P4*	10/1/2025 – 9/30/2026	Benchmarks

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For Year 1, ASES will evaluate PMPM disbursement from the retention fund based on timely and accurate report submissions from the Contractor. For each scored measure (refer to Sections VI.3, VI.4, and VI.5 in this manual), the MCO will receive the following point structure when a complete report and attestation is submitted.

- 1 point = Per scored measure reported on time with valid data
- 0 points = Per scored measured not submitted on time and without valid data

For Year 2, ASES will evaluate PMPM disbursement from the retention fund based on timely and accurate report submissions from the Contractor with any quarter over quarter improvement for each measure. For each scored measure (refer to Sections VI.3, VI.4, and VI.5 in this manual), the MCO will receive the following point structure when a complete report and attestation is submitted.

- 1 point = Per scored measure reported on time with valid data and showing improvement from the previous quarter
- 0 points = Per scored measured not submitted on time and without valid data or no improvement from the previous quarter

After year 2, ASES will provide the MCOs with specific benchmarks to be used to evaluate PMPM disbursement from the retention fund for each measure. For each scored measure (refer to Section VI.3, VI.4, and VI.5 in this manual), the MCO will receive the following point structure when a complete report and attestation is submitted.

- 1 point = Per scored measure meeting the ASES designated benchmark
- 0 points = Per scored measured not submitted on time and without valid data or no improvement from the previous quarter

IV. RETENTION FUND & COMPLIANCE PERCENTAGE

ASES will withhold 2% (two percent) of the monthly PMPM payment otherwise payable to the Contractor to validate that the Contractor has met the specified performance targets of the HCIP. The retention fund, comprised of the withheld amounts, will be disbursed to the Contractor based on the determination made by ASES in accordance to the compliance of the Contractor with the improvement standards and criteria established by ASES in accordance with the HCIP manual.

TIME PERIOD (INCURRED SERVICE FROM CONTRACT TERM)	MONTHLY RETENTION FUND PERCENTAGE
Fiscal Year Quarters Defined in Section II – Reporting Timeframes	2%
HCIP INITIATIVE	
Chronic Conditions Initiative	
Healthy People Initiative	
Emergency Room High Utilizers Initiative	

The retention fund is associated with the HCIP initiatives outlined below for each of the specified timeframes, as per Section 22.4 of the Contract. No later than thirty (30) calendar days after the deadline of the receipt of the Contractor's quarterly submission, ASES shall determine if the Contractor has met the applicable performance objectives for each metric within the initiatives for that period. The evaluation result will determine the percent to be disbursed to the Contractor as described in the following table.

COMPLIANCE PERCENTAGE (BASED ON POINTS EARNED)	TOTAL POINTS REQUIRED	DISBURSEMENT PERCENTAGE OF MONTHLY PMPM
90.0% – 100%	26 points or higher	100%
80.0% – 89.9%	22-25 points	75%
70.0% – 79.9%	18-21 points	50%
50.0% – 69.9%	14-17 points	25%
0.00% – 49.9%	13 points or lower	0%

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V. DEFINITIONS

The following definitions apply to measures of the HCIP Manual:

1. **Active Enrollee**: GHP Enrollee with **continuous** enrollment during the HCIP measurement quarter.

2. **Baseline:** is a measurement at a point in time.

3. **Benchmark:** is a measurement of a standard result.

4. **Continuous Enrollment:** Membership enrollment from the start of a designated period through the end of the designated period without interruption.

5. **Health Care Improvement Program (HCIP)**: Approach developed to improve the quality of services provided to enrollees. The HCIP consists of three (3) initiatives: Chronic Condition Initiative, Healthy People Initiative and Emergency Room High Utilizers Initiative. As part of the HCIP, a Retention Fund shall be maintained by ASES from the monthly PMPM payment to incent the Contractor to meet performance indicators and targets under HCIP specified in the HCIP Manual. The Retention Fund shall be disbursed on a quarterly basis to the Contractor when a determination is made by ASES that the Contractor has complied with the quality standards and criteria established by ASES in accordance with the HCIP Manual and the Contract.

6. **Incurred date**: The date on which the service was provided.

7. **Intervention:** Activities targeted at the achievement of client stability, wellness and autonomy through advocacy, assessment, planning, communication, education, resource management, care coordination, collaboration and service facilitation.

8. **Performance measures**: Periodic measurement of outcomes and results used to assess the effectiveness and efficiency of quality or improvement initiatives on selected indicators.

9. **Per member per month (PMPM) payment:** The fixed monthly amount that the Contractor is paid by ASES for each enrollee to ensure that benefits under the Contract are provided. This payment is made regardless of whether the enrollee receives benefits during the period covered by the payment.

10. **Preventive services**: Health care services provided by a physician or other provider within the scope of his or her practice under Puerto Rico law to detect or prevent disease, disability, behavioral health conditions or other health conditions; and to promote physical and behavioral health and efficiency

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11. **Primary care physician (PCP):** A licensed medical doctor (MD) who is a provider and who, within the scope of practice and in accordance with Puerto Rico certification and licensure requirements, is responsible for providing all required primary care to enrollees. The PCP is responsible for determining services required by enrollees, provides continuity of care and provides referrals for enrollees when medically necessary. A PCP may be a general practitioner, family physician, internal medicine physician, obstetrician/gynecologist, or pediatrician.

12. **Retention fund:** The amount withheld by ASES of the monthly PMPM payment otherwise payable to the Contractor to incentivize the Contractor to meet performance targets under the HCIP described in this manual. This amount shall be equal to the percent of that portion of the total PMPM payment that is determined to be attributable to the Contractor's administration of the HCIP described in this Manual and Sections 12.5 and 22.4 of the Contract. Amounts withheld will be disbursed to the Contractor in whole or in part (as set forth in the HCIP manual and Sections 12.5 and 22.4 of the Contract) in the event of a determination by ASES that the Contractor has complied with the quality standards and criteria established in this HCIP manual.

Note:

Definition references in this manual are from the Contract and the (National Committee for Quality Assurance (NCQA).

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VI. Evaluation and Point Distribution

Contract Period: January 1, 2023 through September 30, 2025

VI.1 Point Distribution

PROGRAM	TOTAL POINTS
Chronic Conditions Initiative	16
Healthy People Initiative	11
Emergency Room High Utilizers Initiative	1
Total Possible Points	**28**

VI.2 Compliance Percentage and Points Earned

COMPLIANCE PERCENTAGE	TOTAL POINTS REQUIRED	DISBURSEMENT PERCENTAGE OF MONTHLY PMPM
90.0% – 100.0%	26 points or higher	100%
80.0% – 89.9%	22-25 points	75%
70.0% – 79.9%	18-21 points	50%
50.0% – 69.9%	14-17 points	25%
0.0% – 49.9%	13 points or lower	0%

VI.3 Chronic Conditions Initiative

The Chronic Conditions Initiative focuses on those enrollees with a chronic condition. Each fiscal year, the quality measures required to be reported for the HCIP will be specified. The reporting templates for the selected condition will be provided to the Contractor. ASES shall disburse the Contractor the applicable percentage of the Retention Fund in accordance with the Contractor's performance across the scored measures and the point distribution section of this Manual. For the purpose of the HCIP, ASES will consider the Chronic Conditions Initiative Metrics described below for compliance and release to the applicable percent of the retention fund for this program.

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CHRONIC CONDITIONS	SCORED MEASURES	POINTS
Medicaid/Federal, State, and CHIP Chronic Conditions		
Diabetes	• Comprehensive Diabetes Care:	
	▪ Hemoglobin A1c (HbA1c) testing	1
	• Hemoglobin A1c (HbA1c) poor control (>9.0%) (ACCM)	1
	▪ BP Control (<140/90 mm Hg)	1
	▪ Eye exam	1
	• Kidney Health Evaluation for Patients With Diabetes	1
	• PQI 01: Diabetes Short Term Complications Admission Rate (ACCM)	1
Asthma	• PQI 15: Asthma in Younger Adults Admission Rate (ACCM)	1
	• ED Use/1000	1
	• PHQ-9	1
Medicaid/Federal and State Chronic Conditions		
Severe Heart Failure	• PQI 08: Heart Failure Admission Rate (ACCM)	1
	• PHQ-9	1
Hypertension	• ED Use/1000	1
Chronic Obstructive Pulmonary Disease (COPD)	• PQI 05: Chronic Obstructive Pulmonary Disease or Asthma in Older Adults Admission Rate (ACCM)	1
Chronic Depression	• Follow up after Hospitalization for Mental Illness: 7 days (ACCM for all BH)	1
	• Follow up after Hospitalization for Mental Illness: 30 days (ACCM for all BH)	1
	• Inpatient Admission/1000	1
Total Points for the Chronic Conditions Initiative		**16**

VI.4 Healthy People Initiative

The Healthy People Initiative focuses on preventive screening for all enrollees. Each fiscal year, the quality measures required to be reported for the HCIP will be specified. The reporting templates for the selected condition will be provided to the Contractor. ASES shall disburse the Contractor the applicable percentage of the Retention Fund in accordance with the Contractor's performance across the scored measures and the point distribution section of this Manual. For the purpose of the HCIP, ASES will consider the Health People Initiative Metrics described below for compliance and release to the applicable percent of the retention fund for this program.

EFFECTIVENESS OF CARE	SCORED MEASURES	POINTS
Healthy People Initiative		
BCS	• Breast Cancer Screening (ACCM)	1
CCS	• Cervical Cancer Screening (ACCM)	1
CBP	• Controlling High Blood Pressure (ACCM)	1
SSD	• Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications. (ACCM)	1
FUH	• Follow-Up After Hospitalization for Mental Illness: 30 days (ACCM)	1
Access/Availability of Care		
AAP	• Adults' Access to Preventive/Ambulatory Health Services	1
OEV	• Oral Evaluation, Dental Services (ACCM)	1
PPC	• Timeliness of Prenatal Care (ACCM)	1
	• Postpartum Care (ACCM)	1
Other Utilization		
W30	• Well-Child Visits First 30 months of Life (ACCM)	1
WCV	• Child and Adolescent Well-Care Visits (ACCM)	1
Total Points for the Health People Initiative		**11**

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VI.5 Emergency Room High Utilizers Initiative

The Emergency Room High Utilizers Initiative is designed to identify high users of emergency services for non-emergency situations and to allow for early interventions to ensure appropriate utilization of services and resources. The Contractor must be prepared to report quarterly on the quality measures listed below. Each fiscal year, the quality measures required to be reported for the HCIP will be specified. The reporting templates for the selected condition will be provided to the Contractor. ASES shall disburse the Contractor the applicable percentage of the Retention Fund in accordance with the Contractor's performance across the scored measures and the point distribution section of this Manual. For the purpose of the HCIP, ASES will consider the Emergency Room High Utilizers Metric described below for compliance and release to the applicable percent of the retention fund for this program.

ER HU INITIATIVE	SCORED MEASURES	POINTS
ER	Overall emergency room utilization rate x 1,000 on identified population with seven or more visits to the emergency room	1
Total Points for the Emergency Room High Utilizer Initiative		1

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HEALTH CARE IMPROVEMENT PROGRAM

HEALTH CARE IMPROVEMENT PROGRAM CODE BOOK I

GOVERNMENT HEALTH PLAN PROGRAM

JANUARY 1, 2023 – SEPTEMBER 30, 2025

Code Book for the first year

1

I.1 Scored Measures for 2021-2022

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

3

	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

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(CBP) Controlling High Blood Pressure	
Technical specifications	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications

(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

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HEALTH CARE IMPROVEMENT PROGRAM

HEALTH CARE IMPROVEMENT PROGRAM BENCHMARKS
FIRST YEAR
BENCHMARKS REFERENCE GUIDE
GOVERNMENT HEALTH PLAN PROGRAM
JANUARY 1, 2023 – SEPTEMBER 30, 2025

Revised June 14, 2022

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HEALTH CARE IMPROVEMENT PROGRAM 2021 BENCHMARKS REFERENCE

CHRONIC CONDITIONS	SCORED MEASURES	2021 BENCHMARKS (1/1/2021-12/31/2021)
Medicaid/Federal, State, and CHIP Chronic Conditions		
Diabetes	• Comprehensive Diabetes Care:	
	• Hemoglobin A1c (HbA1c) testing	82.88%
	• Hemoglobin A1c (HbA1c) poor control (>9.0%) (ACCM)	45.4%*
	• BP Control (<140/90 mm Hg)	58.2%*
	o Eye exam	29.8%
	o Kidney Health Evaluation for Patients with Diabetes	95.15%
	• Admissions/1000	156
Asthma	• Admissions/1000	188
	• ED Use/1000	1072
	• PHQ-9	16.08%
Medicaid/Federal and State Chronic Conditions		
Severe Heart Failure	• Admissions/1000	604
	• PHQ-9	24.24%
Hypertension	• ED Use/1000	805
Chronic Obstructive Pulmonary Disease (COPD)	• Admissions/1000	392
Chronic Depression	• Follow up after Hospitalization for Mental Illness: 7 days	50.66%
	• Follow up after Hospitalization for Mental Illness: 30 days	79.67%
	• Inpatient Admission/1000	235

HEDIS Measures and Technical Resources:
Comprehensive Diabetes Care (CDC): https://www.ncqa.org/hedis/measures/comprehensive-diabetes-care/

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HEALTHY PEPOLE INITIATIVE	SCORED MEASURES	2021 BENCHMARKS (1/1/2021-12/31/2021)
BCS	• Breast Cancer Screening	61.28%
CCS	• Cervical Cancer Screening	52.32%
CBP	• Controlling High Blood Pressure	30.91%
SSD	• Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications.	64.39%
FUH	• Follow-Up After Hospitalization for Mental Illness: 30 days	78.77%
ACCESS / AVAILABILITY OF CARE		
AAP	• Adults' Access to Preventive/Ambulatory Health Services	71.44%
ADV	• Annual Dental Visit	51.29%
OEV	• Oral Evaluation, Dental Services**	TBD
PPC	• Timeliness of Prenatal Care	57.67%
	• Postpartum Care	42.38%
OTHER UTILIZATION		
W30	• Well-Child Visits First 30 months of Life	71.0*
WCV	• Child and Adolescent Well-Care-Visits	46.1*

ER HU INITIATIVE	SCORED MEASURES	2021 BENCHMARKS (1/1/2021-12/31/2021)
ER	Overall emergency room utilization rate x 1,000 on identified population with 7 or more visits to the emergency room	10,763

* HEDIS Measures and Technical Resources:
Child and Adolescent Well-Care Visits – NCQA: https://www.ncqa.org/hedis/measures/child-and-adolescent-well-care-visits/
**TBD – To be determined. 2022 Child Core Set New Measure

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Input Page

VITAL HEALTH PLAN
Report 22: Health Care Improvement Program

Contractor Name:	-
Period:	Quarterly
Period Start Date:	1/1/2023
Period End Date:	9/30/2023
Fiscal Year:	

Prepared By:

Name:	
Title:	
Contact Phone:	
Contact Email:	
Date Prepared:	

CONTENT

ASES   HCIP Report

Tab		Report Name	Submission Frequency
Input Page		-	-
Content		-	-
Attestation		-	-
CCI Medicad Federal		CCI Medicad Federal	Quarterly
CCI CHIP		CCI CHIP	Quarterly
Healthy People Initiative		Healthy People Initiative	Quarterly
ER Initiative		ER Initiative	Quarterly

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ASES

22. HCIP

QUARTERLY REPORTS CERTIFICATION STATEMENT OF

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to

ADMINISTRACIÓN DE SEGUROS DE SALUD DE PUERTO RICO (ASES)

FOR THE PERIOD ENDING
(mm/dd/year)

9/30/2023

0
Name Of Preparer

0
Title

1/0/1900
Phone Number

I hereby attest that the information submitted in the reports herein is current, complete and accurate to the best of my knowledge. I understand that whoever knowingly and willfully makes or causes to be made a false statement or representation on the reports may be prosecuted under the applicable Puerto Rico laws. In addition, knowingly and willfully failing to fully and accurately disclose the information requested may result in denial of a request to participate, or where the entity already participates, a termination of a Contractor's agreement or contract with ASES. Failure to sign a Certification Statement will result in non acceptance of the attached reports.

[date]
Date Signed

Signature

ADMINISTRACION DE
SEGUROS DE SALUD

№ 2 3 - 0 0 4 5

Contrato Número

Health Care Improvement Program

Chronic Conditions Initiative		Medicaid/Federal and Commonwealth	
MCO	-	Period Start Date	1/1/2023
Fiscal Year	January 2023-Sep 2023	Period End Date	9/30/2023

Chronic Conditions Report

Diabetes (Including CHIP population) | Scored measure: Comprehensive Diabetes Care Hemogoblin A1c (HbA1c) testing

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
82.88%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Diabetes (Including CHIP population) | Scored measure: Hemoglobin A1c (HbA1c) poor control (>9.0%)

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
45.4%*	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Diabetes (Including CHIP population) | Scored measure: Blood Pressure Control (<140/90 mm Hg)

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
58.2%*	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Diabetes (Including CHIP population) | Scored measure: Comprehensive Diabetes Care Eye Exam

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
29.8%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Diabetes (Including CHIP population) | Scored measure: Kidney Health Evaluation for Patients With Diabetes

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
95.15%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Diabetes (Including CHIP population) | Scored measure: PQI 01: Diabetes Short Term Complications Admission Rate

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
156	Denominator				
	Rate	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Asthma (Including CHIP) Scored Measure: PQI 15: Asthma in Younger Adults Admissions Rate (ACCM)

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
188	Denominator				
	Rate	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Asthma (Including CHIP) | Scored Measure: ED Use/1000

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
1072	Denominator				
	Rate	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Asthma (Including CHIP) | Scored Measure: PHQ-9

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
16.08%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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Severe Heart Failure | Scored Measure: PQI 08: Heart Failure Admissions/1000 (ACCM)

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
604	Denominator				
	Rate	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Severe Heart Failure | Scored Measure: PHQ-9

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
24.24%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Hypertension | Scored Measure: ED Use/1000

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
805	Denominator				
	Rate	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

c Obstructive Pulmonary Disease (COPD)| Scored Measure: PQI 05: Chronic Obstructive Pulmonary Disease or Asthma in Older Adults Admission Rate (

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
392	Denominator				
	Rate	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Chronic Depression | Scored Measure: Follow up after Hospitalization for Mental Illness: 7 days ACCM for all BH)

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
50.66%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Chronic Depression | Scored Measure: Follow up after Hospitalization for Mental Illness: 30 days (ACCM for all BH)

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
79.67%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Chronic Depression | Scored Measure: Inpatient Admission/1000

Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
235	Denominator				
	Rate	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Health Care Improvement Program

Healthy People Initiative

MCO	--		Period Start Date	1/1/2023
Fiscal Year	January 2023-Sept 2023		Period End Date	9/30/2023

Healthy People Initiative Report

Breast Cancer Screening (BCS)					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
61.28%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Cervical Cancer Screening (CCS)					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
52.32%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Controlling High Blood Pressure (CBP)					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
30.91%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications (SSD)					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
64.39%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Follow-Up After Hospitalization for Mental Illness (FUH) 30 days					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
78.77%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Adults Access to Preventive/Ambulatory Health Services (AAP)					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
71.44%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Annual Dental Visit					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
51.29%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Oral Evaluation, Dental Services** (OEV)					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
TBD	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Timeliness of Prenatal Care (PPC)					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
57.67%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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Postpartum Care (PPC)					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
42.38%	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Other Utilization Well-Child Visit First 30 Months of Life					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
71.0*	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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Child and Adolescent Well-Care Visits (WCV)		Q1	Q2	Q3	Q4
National Benchmark 2021	Numerator				
46.1*	Denominator				
	Percent	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

EMR

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Health Care Improvement Program

Emergency Room High Utilizers Initiative

MCO	-		Period Start Date	1/1/2023
Fiscal Year	January 2023-Sept 2023		Period End Date	9/30/2023

Emergency Room High Utilizers Report

Overall emergency room utilization rate X 1000 on identified population with 7 or more visits to the Emergency Room					
National Benchmark 2021		Q1	Q2	Q3	Q4
	Numerator				
10,763	Denominator				
	Rate	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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Contrato Número

Condition:

Measurement period: Diabetes

Population	Medicaid/Federal, Commonwealth and CHIP Population
ICD 10 CODES	Description
E0800	Diab d/t undrl cond w hyprosm w/o nonket hyprgly-hypros coma
E0801	Diabetes due to underlying condition w hyprosm w coma
E0810	Diabetes due to underlying condition w ketoacidosis w/o coma
E0811	Diabetes due to underlying condition w ketoacidosis w coma
E0821	Diabetes due to underlying condition w diabetic nephropathy
E0822	Diabetes due to undrl cond w diabetic chronic kidney disease
E0829	Diabetes due to undrl condition w oth diabetic kidney comp
E08311	Diab due to undrl cond w unsp diabetic rtnop w macular edema
E08319	Diab due to undrl cond w unsp diab rtnop w/o macular edema
E083211	Diabetes with mild nonp rtnop with macular edema, right eye
E083212	Diabetes with mild nonp rtnop with macular edema, left eye
E083213	Diabetes with mild nonp rtnop with macular edema, bilateral
E083219	Diabetes with mild nonp rtnop with macular edema, unsp
E083291	Diabetes with mild nonp rtnop without macular edema, r eye
E083292	Diab with mild nonp rtnop without macular edema, left eye
E083293	Diabetes with mild nonp rtnop without macular edema, bi
E083299	Diabetes with mild nonp rtnop without macular edema, unsp
E083311	Diabetes with moderate nonp rtnop with macular edema, r eye
E083312	Diab with moderate nonp rtnop with macular edema, left eye
E083313	Diabetes with moderate nonp rtnop with macular edema, bi
E083319	Diabetes with moderate nonp rtnop with macular edema, unsp
E083391	Diab with moderate nonp rtnop without macular edema, r eye
E083392	Diab with moderate nonp rtnop without macular edema, l eye
E083393	Diabetes with moderate nonp rtnop without macular edema, bi
E083399	Diab with moderate nonp rtnop without macular edema, unsp
E083411	Diabetes with severe nonp rtnop with macular edema, r eye
E083412	Diabetes with severe nonp rtnop with macular edema, left eye
E083413	Diabetes with severe nonp rtnop with macular edema, bi
E083419	Diabetes with severe nonp rtnop with macular edema, unsp
E083491	Diabetes with severe nonp rtnop without macular edema, r eye
E083492	Diab with severe nonp rtnop without macular edema, left eye
E083493	Diabetes with severe nonp rtnop without macular edema, bi
E083499	Diabetes with severe nonp rtnop without macular edema, unsp
E083511	Diab with prolif diabetic rtnop with macular edema, r eye
E083512	Diab with prolif diabetic rtnop with macular edema, left eye
E083513	Diabetes with prolif diabetic rtnop with macular edema, bi
E083519	Diabetes with prolif diabetic rtnop with macular edema, unsp
E083521	Diab with prolif diab rtnop with trctn dtch macula, r eye
E083522	Diab with prolif diab rtnop with trctn dtch macula, left eye
E083523	Diab with prolif diabetic rtnop with trctn dtch macula, bi
E083529	Diab with prolif diabetic rtnop with trctn dtch macula, unsp
E083531	Diab with prolif diab rtnop with trctn dtch n-mcla, r eye
E083532	Diab with prolif diab rtnop with trctn dtch n-mcla, left eye
E083533	Diab with prolif diabetic rtnop with trctn dtch n-mcla, bi
E083539	Diab with prolif diabetic rtnop with trctn dtch n-mcla, unsp
E083541	Diabetes with prolif diabetic rtnop with comb detach, r eye

Condition:

Measurement period: Diabetes

Population	Medicaid/Federal, Commonwealth and CHIP Population
ICD 10 CODES	**Description**
E083542	Diab with prolif diabetic rtnop with comb detach, left eye
E083543	Diabetes with prolif diabetic rtnop with combined detach, bi
E083549	Diabetes with prolif diabetic rtnop with comb detach, unsp
E083551	Diabetes with stable prolif diabetic retinopathy, right eye
E083552	Diabetes with stable prolif diabetic retinopathy, left eye
E083553	Diabetes with stable prolif diabetic retinopathy, bilateral
E083559	Diabetes with stable prolif diabetic retinopathy, unsp
E083591	Diab with prolif diabetic rtnop without macular edema, r eye
E083592	Diab with prolif diab rtnop without macular edema, left eye
E083593	Diab with prolif diabetic rtnop without macular edema, bi
E083599	Diab with prolif diabetic rtnop without macular edema, unsp
E0836	Diabetes due to underlying condition w diabetic cataract
E0837X1	Diab with diabetic macular edema, resolved fol trtmt, r eye
E0837X2	Diab with diab macular edema, resolved fol trtmt, left eye
E0837X3	Diabetes with diabetic macular edema, resolved fol trtmt, bi
E0837X9	Diab with diabetic macular edema, resolved fol trtmt, unsp
E0839	Diabetes due to undrl condition w oth diabetic opth comp
E0840	Diabetes due to underlying condition w diabetic neurop, unsp
E0841	Diabetes due to undrl condition w diabetic mononeuropathy
E0842	Diabetes due to underlying condition w diabetic polyneurop
E0843	Diab due to undrl cond w diabetic autonm (poly)neuropathy
E0844	Diabetes due to underlying condition w diabetic amyotrophy
E0849	Diabetes due to undrl condition w oth diabetic neuro comp
E0851	Diab due to undrl cond w diab prph angiopath w/o gangrene
E0852	Diab due to undrl cond w diabetic prph angiopath w gangrene
E0859	Diabetes due to underlying condition w oth circulatory comp
E08610	Diabetes due to undrl cond w diabetic neuropathic arthrop
E08618	Diabetes due to underlying condition w oth diabetic arthrop
E08620	Diabetes due to underlying condition w diabetic dermatitis
E08621	Diabetes mellitus due to underlying condition w foot ulcer
E08622	Diabetes due to underlying condition w oth skin ulcer
E08628	Diabetes due to underlying condition w oth skin comp
E08630	Diabetes due to underlying condition w periodontal disease
E08638	Diabetes due to underlying condition w oth oral comp
E08641	Diabetes due to underlying condition w hypoglycemia w coma
E08649	Diabetes due to underlying condition w hypoglycemia w/o coma
E0865	Diabetes due to underlying condition w hyperglycemia
E0869	Diabetes due to underlying condition w oth complication
E088	Diabetes due to underlying condition w unsp complications
E089	Diabetes due to underlying condition w/o complications
E0900	Drug/chem diab w hyprosm w/o nonket hyprgly-hypros coma
E0901	Drug/chem diabetes mellitus w hyperosmolarity w coma
E0910	Drug/chem diabetes mellitus w ketoacidosis w/o coma
E0911	Drug/chem diabetes mellitus w ketoacidosis w coma
E0921	Drug/chem diabetes mellitus w diabetic nephropathy
E0922	Drug/chem diabetes w diabetic chronic kidney disease

Condition:

Measurement period: Diabetes

Population	Medicaid/Federal, Commonwealth and CHIP Population
ICD 10 CODES	**Description**
E0929	Drug/chem diabetes w oth diabetic kidney complication
E09311	Drug/chem diabetes w unsp diabetic rtnop w macular edema
E09319	Drug/chem diabetes w unsp diabetic rtnop w/o macular edema
E093211	Drug/chem diab with mild nonp rtnop with mclr edema, r eye
E093212	Drug/chem diab with mild nonp rtnop with mclr edema, l eye
E093213	Drug/chem diab with mild nonp rtnop with macular edema, bi
E093219	Drug/chem diab with mild nonp rtnop with macular edema, unsp
E093291	Drug/chem diab with mild nonp rtnop w/o mclr edema, r eye
E093292	Drug/chem diab with mild nonp rtnop w/o mclr edema, l eye
E093293	Drug/chem diab with mild nonp rtnop without mclr edema, bi
E093299	Drug/chem diab with mild nonp rtnop without mclr edema, unsp
E093311	Drug/chem diab with mod nonp rtnop with macular edema, r eye
E093312	Drug/chem diab with mod nonp rtnop with macular edema, l eye
E093313	Drug/chem diab with mod nonp rtnop with macular edema, bi
E093319	Drug/chem diab with mod nonp rtnop with macular edema, unsp
E093391	Drug/chem diab with mod nonp rtnop without mclr edema, r eye
E093392	Drug/chem diab with mod nonp rtnop without mclr edema, l eye
E093393	Drug/chem diab with mod nonp rtnop without macular edema, bi
E093399	Drug/chem diab with mod nonp rtnop without mclr edema, unsp
E093411	Drug/chem diab with severe nonp rtnop with mclr edema, r eye
E093412	Drug/chem diab with severe nonp rtnop with mclr edema, l eye
E093413	Drug/chem diab with severe nonp rtnop with macular edema, bi
E093419	Drug/chem diab with severe nonp rtnop with mclr edema, unsp
E093491	Drug/chem diab with severe nonp rtnop w/o mclr edema, r eye
E093492	Drug/chem diab with severe nonp rtnop w/o mclr edema, l eye
E093493	Drug/chem diab with severe nonp rtnop without mclr edema, bi
E093499	Drug/chem diab with severe nonp rtnop w/o mclr edema, unsp
E093511	Drug/chem diab with prolif diab rtnop with mclr edema, r eye
E093512	Drug/chem diab with prolif diab rtnop with mclr edema, l eye
E093513	Drug/chem diab with prolif diab rtnop with macular edema, bi
E093519	Drug/chem diab with prolif diab rtnop with mclr edema, unsp
E093521	Drug/chem diab w prolif diab rtnop w trctn dtch macula,r eye
E093522	Drug/chem diab w prolif diab rtnop w trctn dtch macula,l eye
E093523	Drug/chem diab w prolif diab rtnop w trctn dtch macula, bi
E093529	Drug/chem diab w prolif diab rtnop w trctn dtch macula, unsp
E093531	Drug/chem diab w prolif diab rtnop w trctn dtch n-mcla,r eye
E093532	Drug/chem diab w prolif diab rtnop w trctn dtch n-mcla,l eye
E093533	Drug/chem diab w prolif diab rtnop w trctn dtch n-mcla, bi
E093539	Drug/chem diab w prolif diab rtnop w trctn dtch n-mcla, unsp
E093541	Drug/chem diab w prolif diab rtnop with comb detach, r eye
E093542	Drug/chem diab w prolif diab rtnop with comb detach, l eye
E093543	Drug/chem diab with prolif diab rtnop with comb detach, bi
E093549	Drug/chem diab with prolif diab rtnop with comb detach, unsp
E093551	Drug/chem diabetes with stable prolif diabetic rtnop, r eye
E093552	Drug/chem diab with stable prolif diabetic rtnop, left eye
E093553	Drug/chem diabetes with stable prolif diabetic rtnop, bi

Condition:

Measurement period: Diabetes

Population	Medicaid/Federal, Commonwealth and CHIP Population
ICD 10 CODES	**Description**
E093559	Drug/chem diabetes with stable prolif diabetic rtnop, unsp
E093591	Drug/chem diab with prolif diab rtnop w/o mclr edema, r eye
E093592	Drug/chem diab with prolif diab rtnop w/o mclr edema, l eye
E093593	Drug/chem diab with prolif diab rtnop without mclr edema, bi
E093599	Drug/chem diab with prolif diab rtnop w/o mclr edema, unsp
E0936	Drug/chem diabetes mellitus w diabetic cataract
E0937X1	Drug/chem diab w diab mclr edma, resolved fol trtmt, r eye
E0937X2	Drug/chem diab w diab mclr edma, resolved fol trtmt, l eye
E0937X3	Drug/chem diab with diab mclr edema, resolved fol trtmt, bi
E0937X9	Drug/chem diab with diab mclr edma, resolved fol trtmt, unsp
E0939	Drug/chem diabetes w oth diabetic ophthalmic complication
E0940	Drug/chem diabetes w neuro comp w diabetic neuropathy, unsp
E0941	Drug/chem diabetes w neuro comp w diabetic mononeuropathy
E0942	Drug/chem diabetes w neurological comp w diabetic polyneurop
E0943	Drug/chem diab w neuro comp w diab autonm (poly)neuropathy
E0944	Drug/chem diabetes w neurological comp w diabetic amyotrophy
E0949	Drug/chem diabetes w neuro comp w oth diabetic neuro comp
E0951	Drug/chem diabetes w diabetic prph angiopath w/o gangrene
E0952	Drug/chem diabetes w diabetic prph angiopath w gangrene
E0959	Drug/chem diabetes mellitus w oth circulatory complications
E09610	Drug/chem diabetes w diabetic neuropathic arthropathy
E09618	Drug/chem diabetes mellitus w oth diabetic arthropathy
E09620	Drug/chem diabetes mellitus w diabetic dermatitis
E09621	Drug or chemical induced diabetes mellitus with foot ulcer
E09622	Drug or chemical induced diabetes mellitus w oth skin ulcer
E09628	Drug/chem diabetes mellitus w oth skin complications
E09630	Drug/chem diabetes mellitus w periodontal disease
E09638	Drug/chem diabetes mellitus w oth oral complications
E09641	Drug/chem diabetes mellitus w hypoglycemia w coma
E09649	Drug/chem diabetes mellitus w hypoglycemia w/o coma
E0965	Drug or chemical induced diabetes mellitus w hyperglycemia
E0969	Drug/chem diabetes mellitus w oth complication
E098	Drug/chem diabetes mellitus w unsp complications
E099	Drug or chemical induced diabetes mellitus w/o complications
E1010	Type 1 diabetes mellitus with ketoacidosis without coma
E1011	Type 1 diabetes mellitus with ketoacidosis with coma
E1021	Type 1 diabetes mellitus with diabetic nephropathy
E1022	Type 1 diabetes mellitus w diabetic chronic kidney disease
E1029	Type 1 diabetes mellitus w oth diabetic kidney complication
E10311	Type 1 diabetes w unsp diabetic retinopathy w macular edema
E10319	Type 1 diabetes w unsp diabetic rtnop w/o macular edema
E103211	Type 1 diab with mild nonp rtnop with macular edema, r eye
E103212	Type 1 diab with mild nonp rtnop with macular edema, l eye
E103213	Type 1 diabetes with mild nonp rtnop with macular edema, bi
E103219	Type 1 diab with mild nonp rtnop with macular edema, unsp
E103291	Type 1 diab with mild nonp rtnop without mclr edema, r eye

Condition:

Measurement period: Diabetes

Contrato Número

Population	Medicaid/Federal, Commonwealth and CHIP Population
ICD 10 CODES	**Description**
E103292	Type 1 diab with mild nonp rtnop without mclr edema, l eye
E103293	Type 1 diab with mild nonp rtnop without macular edema, bi
E103299	Type 1 diab with mild nonp rtnop without macular edema, unsp
E103311	Type 1 diab with mod nonp rtnop with macular edema, r eye
E103312	Type 1 diab with mod nonp rtnop with macular edema, l eye
E103313	Type 1 diab with moderate nonp rtnop with macular edema, bi
E103319	Type 1 diab with mod nonp rtnop with macular edema, unsp
E103391	Type 1 diab with mod nonp rtnop without macular edema, r eye
E103392	Type 1 diab with mod nonp rtnop without macular edema, l eye
E103393	Type 1 diab with mod nonp rtnop without macular edema, bi
E103399	Type 1 diab with mod nonp rtnop without macular edema, unsp
E103411	Type 1 diab with severe nonp rtnop with macular edema, r eye
E103412	Type 1 diab with severe nonp rtnop with macular edema, l eye
E103413	Type 1 diab with severe nonp rtnop with macular edema, bi
E103419	Type 1 diab with severe nonp rtnop with macular edema, unsp
E103491	Type 1 diab with severe nonp rtnop without mclr edema, r eye
E103492	Type 1 diab with severe nonp rtnop without mclr edema, l eye
E103493	Type 1 diab with severe nonp rtnop without macular edema, bi
E103499	Type 1 diab with severe nonp rtnop without mclr edema, unsp
E103511	Type 1 diab with prolif diab rtnop with macular edema, r eye
E103512	Type 1 diab with prolif diab rtnop with macular edema, l eye
E103513	Type 1 diab with prolif diab rtnop with macular edema, bi
E103519	Type 1 diab with prolif diab rtnop with macular edema, unsp
E103521	Type 1 diab w prolif diab rtnop w trctn dtch macula, r eye
E103522	Type 1 diab w prolif diab rtnop w trctn dtch macula, l eye
E103523	Type 1 diab w prolif diab rtnop with trctn dtch macula, bi
E103529	Type 1 diab w prolif diab rtnop with trctn dtch macula, unsp
E103531	Type 1 diab w prolif diab rtnop w trctn dtch n-mcla, r eye
E103532	Type 1 diab w prolif diab rtnop w trctn dtch n-mcla, l eye
E103533	Type 1 diab w prolif diab rtnop with trctn dtch n-mcla, bi
E103539	Type 1 diab w prolif diab rtnop with trctn dtch n-mcla, unsp
E103541	Type 1 diab with prolif diab rtnop with comb detach, r eye
E103542	Type 1 diab with prolif diab rtnop with comb detach, l eye
E103543	Type 1 diab with prolif diabetic rtnop with comb detach, bi
E103549	Type 1 diab with prolif diab rtnop with comb detach, unsp
E103551	Type 1 diabetes with stable prolif diabetic rtnop, right eye
E103552	Type 1 diabetes with stable prolif diabetic rtnop, left eye
E103553	Type 1 diabetes with stable prolif diabetic rtnop, bilateral
E103559	Type 1 diabetes with stable prolif diabetic rtnop, unsp
E103591	Type 1 diab with prolif diab rtnop without mclr edema, r eye
E103592	Type 1 diab with prolif diab rtnop without mclr edema, l eye
E103593	Type 1 diab with prolif diab rtnop without macular edema, bi
E103599	Type 1 diab with prolif diab rtnop without mclr edema, unsp
E1036	Type 1 diabetes mellitus with diabetic cataract
E1037X1	Type 1 diab with diab mclr edema, resolved fol trtmt, r eye
E1037X2	Type 1 diab with diab mclr edema, resolved fol trtmt, l eye

EMR

Condition:

Measurement period: Diabetes

Population	Medicaid/Federal, Commonwealth and CHIP Population
ICD 10 CODES	Description
E1037X3	Type 1 diab with diab macular edema, resolved fol trtmt, bi
E1037X9	Type 1 diab with diab mclr edema, resolved fol trtmt, unsp
E1039	Type 1 diabetes w oth diabetic ophthalmic complication
E1040	Type 1 diabetes mellitus with diabetic neuropathy, unsp
E1041	Type 1 diabetes mellitus with diabetic mononeuropathy
E1042	Type 1 diabetes mellitus with diabetic polyneuropathy
E1043	Type 1 diabetes w diabetic autonomic (poly)neuropathy
E1044	Type 1 diabetes mellitus with diabetic amyotrophy
E1049	Type 1 diabetes w oth diabetic neurological complication
E1051	Type 1 diabetes w diabetic peripheral angiopath w/o gangrene
E1052	Type 1 diabetes w diabetic peripheral angiopathy w gangrene
E1059	Type 1 diabetes mellitus with oth circulatory complications
E10610	Type 1 diabetes mellitus w diabetic neuropathic arthropathy
E10618	Type 1 diabetes mellitus with other diabetic arthropathy
E10620	Type 1 diabetes mellitus with diabetic dermatitis
E10621	Type 1 diabetes mellitus with foot ulcer
E10622	Type 1 diabetes mellitus with other skin ulcer
E10628	Type 1 diabetes mellitus with other skin complications
E10630	Type 1 diabetes mellitus with periodontal disease
E10638	Type 1 diabetes mellitus with other oral complications
E10641	Type 1 diabetes mellitus with hypoglycemia with coma
E10649	Type 1 diabetes mellitus with hypoglycemia without coma
E1065	Type 1 diabetes mellitus with hyperglycemia
E1069	Type 1 diabetes mellitus with other specified complication
E108	Type 1 diabetes mellitus with unspecified complications
E109	Type 1 diabetes mellitus without complications
E1100	Type 2 diab w hyprosm w/o nonket hyprgly-hypros coma (NKHHC)
E1101	Type 2 diabetes mellitus with hyperosmolarity with coma
E1121	Type 2 diabetes mellitus with diabetic nephropathy
E1122	Type 2 diabetes mellitus w diabetic chronic kidney disease
E1129	Type 2 diabetes mellitus w oth diabetic kidney complication
E11311	Type 2 diabetes w unsp diabetic retinopathy w macular edema
E11319	Type 2 diabetes w unsp diabetic rtnop w/o macular edema
E113211	Type 2 diab with mild nonp rtnop with macular edema, r eye
E113212	Type 2 diab with mild nonp rtnop with macular edema, l eye
E113213	Type 2 diabetes with mild nonp rtnop with macular edema, bi
E113219	Type 2 diab with mild nonp rtnop with macular edema, unsp
E113291	Type 2 diab with mild nonp rtnop without mclr edema, r eye
E113292	Type 2 diab with mild nonp rtnop without mclr edema, l eye
E113293	Type 2 diab with mild nonp rtnop without macular edema, bi
E113299	Type 2 diab with mild nonp rtnop without macular edema, unsp
E113311	Type 2 diab with mod nonp rtnop with macular edema, r eye
E113312	Type 2 diab with mod nonp rtnop with macular edema, l eye
E113313	Type 2 diab with moderate nonp rtnop with macular edema, bi
E113319	Type 2 diab with mod nonp rtnop with macular edema, unsp
E113391	Type 2 diab with mod nonp rtnop without macular edema, r eye

Condition:

Measurement period: Diabetes

Population	Medicaid/Federal, Commonwealth and CHIP Population
ICD 10 CODES	**Description**
E113392	Type 2 diab with mod nonp rtnop without macular edema, l eye
E113393	Type 2 diab with mod nonp rtnop without macular edema, bi
E113399	Type 2 diab with mod nonp rtnop without macular edema, unsp
E113411	Type 2 diab with severe nonp rtnop with macular edema, r eye
E113412	Type 2 diab with severe nonp rtnop with macular edema, l eye
E113413	Type 2 diab with severe nonp rtnop with macular edema, bi
E113419	Type 2 diab with severe nonp rtnop with macular edema, unsp
E113491	Type 2 diab with severe nonp rtnop without mclr edema, r eye
E113492	Type 2 diab with severe nonp rtnop without mclr edema, l eye
E113493	Type 2 diab with severe nonp rtnop without macular edema, bi
E113499	Type 2 diab with severe nonp rtnop without mclr edema, unsp
E113511	Type 2 diab with prolif diab rtnop with macular edema, r eye
E113512	Type 2 diab with prolif diab rtnop with macular edema, l eye
E113513	Type 2 diab with prolif diab rtnop with macular edema, bi
E113519	Type 2 diab with prolif diab rtnop with macular edema, unsp
E113521	Type 2 diab w prolif diab rtnop w trctn dtch macula, r eye
E113522	Type 2 diab w prolif diab rtnop w trctn dtch macula, l eye
E113523	Type 2 diab w prolif diab rtnop with trctn dtch macula, bi
E113529	Type 2 diab w prolif diab rtnop with trctn dtch macula, unsp
E113531	Type 2 diab w prolif diab rtnop w trctn dtch n-mcla, r eye
E113532	Type 2 diab w prolif diab rtnop w trctn dtch n-mcla, l eye
E113533	Type 2 diab w prolif diab rtnop with trctn dtch n-mcla, bi
E113539	Type 2 diab w prolif diab rtnop with trctn dtch n-mcla, unsp
E113541	Type 2 diab with prolif diab rtnop with comb detach, r eye
E113542	Type 2 diab with prolif diab rtnop with comb detach, l eye
E113543	Type 2 diab with prolif diabetic rtnop with comb detach, bi
E113549	Type 2 diab with prolif diab rtnop with comb detach, unsp
E113551	Type 2 diabetes with stable prolif diabetic rtnop, right eye
E113552	Type 2 diabetes with stable prolif diabetic rtnop, left eye
E113553	Type 2 diabetes with stable prolif diabetic rtnop, bilateral
E113559	Type 2 diabetes with stable prolif diabetic rtnop, unsp
E113591	Type 2 diab with prolif diab rtnop without mclr edema, r eye
E113592	Type 2 diab with prolif diab rtnop without mclr edema, l eye
E113593	Type 2 diab with prolif diab rtnop without macular edema, bi
E113599	Type 2 diab with prolif diab rtnop without mclr edema, unsp
E1136	Type 2 diabetes mellitus with diabetic cataract
E1137X1	Type 2 diab with diab mclr edema, resolved fol trtmt, r eye
E1137X2	Type 2 diab with diab mclr edema, resolved fol trtmt, l eye
E1137X3	Type 2 diab with diab macular edema, resolved fol trtmt, bi
E1137X9	Type 2 diab with diab mclr edema, resolved fol trtmt, unsp
E1139	Type 2 diabetes w oth diabetic ophthalmic complication
E1140	Type 2 diabetes mellitus with diabetic neuropathy, unsp
E1141	Type 2 diabetes mellitus with diabetic mononeuropathy
E1142	Type 2 diabetes mellitus with diabetic polyneuropathy
E1143	Type 2 diabetes w diabetic autonomic (poly)neuropathy
E1144	Type 2 diabetes mellitus with diabetic amyotrophy

Condition:

Measurement period: Diabetes

Population	Medicaid/Federal, Commonwealth and CHIP Population
ICD 10 CODES	**Description**
E1149	Type 2 diabetes w oth diabetic neurological complication
E1151	Type 2 diabetes w diabetic peripheral angiopath w/o gangrene
E1152	Type 2 diabetes w diabetic peripheral angiopathy w gangrene
E1159	Type 2 diabetes mellitus with oth circulatory complications
E11610	Type 2 diabetes mellitus w diabetic neuropathic arthropathy
E11618	Type 2 diabetes mellitus with other diabetic arthropathy
E11620	Type 2 diabetes mellitus with diabetic dermatitis
E11621	Type 2 diabetes mellitus with foot ulcer
E11622	Type 2 diabetes mellitus with other skin ulcer
E11628	Type 2 diabetes mellitus with other skin complications
E11630	Type 2 diabetes mellitus with periodontal disease
E11638	Type 2 diabetes mellitus with other oral complications
E11641	Type 2 diabetes mellitus with hypoglycemia with coma
E11649	Type 2 diabetes mellitus with hypoglycemia without coma
E1165	Type 2 diabetes mellitus with hyperglycemia
E1169	Type 2 diabetes mellitus with other specified complication
E118	Type 2 diabetes mellitus with unspecified complications
E119	Type 2 diabetes mellitus without complications
E1300	Oth diab w hyprosm w/o nonket hyprgly-hypros coma (NKHHC)
E1301	Oth diabetes mellitus with hyperosmolarity with coma
E1310	Oth diabetes mellitus with ketoacidosis without coma
E1311	Oth diabetes mellitus with ketoacidosis with coma
E1321	Other specified diabetes mellitus with diabetic nephropathy
E1322	Oth diabetes mellitus with diabetic chronic kidney disease
E1329	Oth diabetes mellitus with oth diabetic kidney complication
E13311	Oth diabetes w unsp diabetic retinopathy w macular edema
E13319	Oth diabetes w unsp diabetic retinopathy w/o macular edema
E133211	Oth diabetes with mild nonp rtnop with macular edema, r eye
E133212	Oth diab with mild nonp rtnop with macular edema, left eye
E133213	Oth diabetes with mild nonp rtnop with macular edema, bi
E133219	Oth diabetes with mild nonp rtnop with macular edema, unsp
E133291	Oth diab with mild nonp rtnop without macular edema, r eye
E133292	Oth diab with mild nonp rtnop without macular edema, l eye
E133293	Oth diabetes with mild nonp rtnop without macular edema, bi
E133299	Oth diab with mild nonp rtnop without macular edema, unsp
E133311	Oth diab with moderate nonp rtnop with macular edema, r eye
E133312	Oth diab with moderate nonp rtnop with macular edema, l eye
E133313	Oth diabetes with moderate nonp rtnop with macular edema, bi
E133319	Oth diab with moderate nonp rtnop with macular edema, unsp
E133391	Oth diab with mod nonp rtnop without macular edema, r eye
E133392	Oth diab with mod nonp rtnop without macular edema, l eye
E133393	Oth diab with moderate nonp rtnop without macular edema, bi
E133399	Oth diab with mod nonp rtnop without macular edema, unsp
E133411	Oth diab with severe nonp rtnop with macular edema, r eye
E133412	Oth diab with severe nonp rtnop with macular edema, left eye
E133413	Oth diabetes with severe nonp rtnop with macular edema, bi

Contrato Número

EMR

№ 2 3 - 0 0 4 5

Condition:

Measurement period: Diabetes

Population	Medicaid/Federal, Commonwealth and CHIP Population
ICD 10 CODES	**Description**
E133419	Oth diabetes with severe nonp rtnop with macular edema, unsp
E133491	Oth diab with severe nonp rtnop without macular edema, r eye
E133492	Oth diab with severe nonp rtnop without macular edema, l eye
E133493	Oth diab with severe nonp rtnop without macular edema, bi
E133499	Oth diab with severe nonp rtnop without macular edema, unsp
E133511	Oth diab with prolif diab rtnop with macular edema, r eye
E133512	Oth diab with prolif diab rtnop with macular edema, left eye
E133513	Oth diab with prolif diabetic rtnop with macular edema, bi
E133519	Oth diab with prolif diabetic rtnop with macular edema, unsp
E133521	Oth diab w prolif diab rtnop with trctn dtch macula, r eye
E133522	Oth diab w prolif diab rtnop with trctn dtch macula, l eye
E133523	Oth diab with prolif diab rtnop with trctn dtch macula, bi
E133529	Oth diab with prolif diab rtnop with trctn dtch macula, unsp
E133531	Oth diab w prolif diab rtnop with trctn dtch n-mcla, r eye
E133532	Oth diab w prolif diab rtnop with trctn dtch n-mcla, l eye
E133533	Oth diab with prolif diab rtnop with trctn dtch n-mcla, bi
E133539	Oth diab with prolif diab rtnop with trctn dtch n-mcla, unsp
E133541	Oth diab with prolif diabetic rtnop with comb detach, r eye
E133542	Oth diab with prolif diab rtnop with comb detach, left eye
E133543	Oth diabetes with prolif diabetic rtnop with comb detach, bi
E133549	Oth diab with prolif diabetic rtnop with comb detach, unsp
E133551	Oth diabetes with stable prolif diabetic rtnop, right eye
E133552	Oth diabetes with stable prolif diabetic rtnop, left eye
E133553	Oth diabetes with stable prolif diabetic rtnop, bilateral
E133559	Oth diabetes with stable prolif diabetic retinopathy, unsp
E133591	Oth diab with prolif diab rtnop without macular edema, r eye
E133592	Oth diab with prolif diab rtnop without macular edema, l eye
E133593	Oth diab with prolif diab rtnop without macular edema, bi
E133599	Oth diab with prolif diab rtnop without macular edema, unsp
E1336	Other specified diabetes mellitus with diabetic cataract
E1337X1	Oth diab with diab macular edema, resolved fol trtmt, r eye
E1337X2	Oth diab with diab macular edema, resolved fol trtmt, l eye
E1337X3	Oth diab with diabetic macular edema, resolved fol trtmt, bi
E1337X9	Oth diab with diab macular edema, resolved fol trtmt, unsp
E1339	Oth diabetes mellitus w oth diabetic ophthalmic complication
E1340	Oth diabetes mellitus with diabetic neuropathy, unspecified
E1341	Oth diabetes mellitus with diabetic mononeuropathy
E1342	Oth diabetes mellitus with diabetic polyneuropathy
E1343	Oth diabetes mellitus w diabetic autonomic (poly)neuropathy
E1344	Other specified diabetes mellitus with diabetic amyotrophy
E1349	Oth diabetes w oth diabetic neurological complication
E1351	Oth diabetes w diabetic peripheral angiopathy w/o gangrene
E1352	Oth diabetes w diabetic peripheral angiopathy w gangrene
E1359	Oth diabetes mellitus with other circulatory complications
E13610	Oth diabetes mellitus with diabetic neuropathic arthropathy
E13618	Oth diabetes mellitus with other diabetic arthropathy

EMR

Condition:

Measurement period: **Diabetes**

Population	Medicaid/Federal, Commonwealth and CHIP Population
ICD 10 CODES	**Description**
E13620	Other specified diabetes mellitus with diabetic dermatitis
E13621	Other specified diabetes mellitus with foot ulcer
E13622	Other specified diabetes mellitus with other skin ulcer
E13628	Oth diabetes mellitus with other skin complications
E13630	Other specified diabetes mellitus with periodontal disease
E13638	Oth diabetes mellitus with other oral complications
E13641	Oth diabetes mellitus with hypoglycemia with coma
E13649	Oth diabetes mellitus with hypoglycemia without coma
E1365	Other specified diabetes mellitus with hyperglycemia
E1369	Oth diabetes mellitus with other specified complication
E138	Oth diabetes mellitus with unspecified complications
E139	Other specified diabetes mellitus without complications
Z9483	Pancreas transplant status

Contrato Número

Condition: **Asthma**

Population	Medicaid/Federal, Commonwealth
ICD 10 CODES	**Description**
J4520	Mild intermittent asthma, uncomplicated
J4521	Mild intermittent asthma with (acute) exacerbation
J4522	Mild intermittent asthma with status asthmaticus
J4530	Mild persistent asthma, uncomplicated
J4531	Mild persistent asthma with (acute) exacerbation
J4532	Mild persistent asthma with status asthmaticus
J4540	Moderate persistent asthma, uncomplicated
J4541	Moderate persistent asthma with (acute) exacerbation
J4542	Moderate persistent asthma with status asthmaticus
J4550	Severe persistent asthma, uncomplicated
J4551	Severe persistent asthma with (acute) exacerbation
J4552	Severe persistent asthma with status asthmaticus
J45901	Unspecified asthma with (acute) exacerbation
J45902	Unspecified asthma with status asthmaticus
J45909	Unspecified asthma, uncomplicated
J45990	Exercise induced bronchospasm
J45991	Cough variant asthma
J45998	Other asthma

EMR

Condition:	Severe Heart Failure	№ 2 3 - 0 0 4 5

Population	Medicaid/Federal and Commonwealth
ICD 10 CODES	Description
I501	Left ventricular failure, unspecified
I5020	Unspecified systolic (congestive) heart failure
I5021	Acute systolic (congestive) heart failure
I5022	Chronic systolic (congestive) heart failure
I5023	Acute on chronic systolic (congestive) heart failure
I5030	Unspecified diastolic (congestive) heart failure
I5031	Acute diastolic (congestive) heart failure
I5032	Chronic diastolic (congestive) heart failure
I5033	Acute on chronic diastolic (congestive) heart failure
I5040	Unsp combined systolic and diastolic (congestive) hrt fail
I5041	Acute combined systolic and diastolic (congestive) hrt fail
I5042	Chronic combined systolic and diastolic hrt fail
I5043	Acute on chronic combined systolic and diastolic hrt fail
I509	Heart failure, unspecified

Contrato Número

Condition:	Hypertension

Population	Medicaid/Federal and Commonwealth
ICD10 Codes	Description
I10	Hypertension
I110	Hypertensive heart disease without heart failure
I119	Hypertensive heart disease with heart failure
I120	Hypertensive chronic kidney disease, stage 1-4
I129	Hypertensive chronic kidney disease, stage 5 or ESRD
I130	Hypertensive heart disease with heart failure and chronic kidney disease stage 1-4
I1310	Hypertensive heart disease without heart failure and chronic kidney disease stage 1-4
I1311	Hypertensive heart disease without heart failure and chronic kidney disease stage 5 or ESRD
I132	Hypertensive heart disease with heart failure and chronic kidney disease stage 5 or ESRD

Condition:	Chronic Obstructive Pulmonary Disease (COPD)

Medicaid/Federal and Commonwealth	
ICD10 Codes	Description
J410	Simple chronic bronchitis
J411	Mucopurulent chronic bronchitis
J418	Mixed simple and mucopurulent chronic bronchitis
J42	Unspecified chronic bronchitis
J430	Unilateral pulmonary emphysema [MacLeods syndrome]
J431	Panlobular emphysema
J432	Centrilobular emphysema
J438	Other emphysema
J439	Emphysema unspecified
J440	Chronic obstructive pulmonary disease w acute lower resp infect
J441	Chronic obstructive pulmonary disease w (acute) exacerbation
J449	Chronic obstructive pulmonary disease, unspecified

EMR

Condition: Chronic Depression

Population	Medicaid/Federal and Commonwealth	
ICD 10 Codes Considered	**Description**	Contrato Número
F3010	Manic episode without psychotic symptoms unspecified	
F3011	Manic episode without psychotic symptoms mild	
F3012	Manic episode without psychotic symptoms moderate	
F3013	Manic episode severe without psychotic symptoms	
F302	Manic episode severe with psychotic symptoms	
F303	Manic episode in partial remission	
F304	Manic episode in full remission	
F308	Other manic episodes	
F309	Manic episode unspecified	
F310	Bipolar disorder current episode hypomanic	
F3110	Bipolar disord crnt episode manic wo psych features unsp	
F3111	Bipolar disord crnt episode manic wo psych features mild	
F3112	Bipolar disord crnt episode manic wo psych features mod	
F3113	Bipolar disord crnt epsd manic wo psych features severe	
F312	Bipolar disord crnt episode manic severe w psych features	
F3130	Bipolar disord crnt epsd depress mild or mod severt unsp	
F3131	Bipolar disorder current episode depressed mild	
F3132	Bipolar disorder current episode depressed moderate	
F314	Bipolar disord crnt epsd depress sev wo psych features	
F315	Bipolar disord crnt epsd depress severe w psych features	
F3160	Bipolar disorder current episode mixed unspecified	
F3161	Bipolar disorder current episode mixed mild	
F3162	Bipolar disorder current episode mixed moderate	
F3163	Bipolar disord crnt epsd mixed severe wo psych features	
F3164	Bipolar disord crnt episode mixed severe w psych features	
F3170	Bipolar disord currently in remis most recent episode unsp	
F3171	Bipolar disord in partial remis most recent epsd hypomanic	
F3172	Bipolar disord in full remis most recent episode hypomanic	
F3173	Bipolar disord in partial remis most recent episode manic	
F3174	Bipolar disorder in full remis most recent episode manic	
F3175	Bipolar disord in partial remis most recent epsd depress	
F3176	Bipolar disorder in full remis most recent episode depress	
F3177	Bipolar disord in partial remis most recent episode mixed	
F3178	Bipolar disorder in full remis most recent episode mixed	
F3181	Bipolar II disorder	
F3189	Other bipolar disorder	
F319	Bipolar disorder unspecified	
F320	Major depressive disorder single episode mild	
F321	Major depressive disorder single episode moderate	
F322	Major depressv disord single epsd sev wo psych features	
F323	Major depressv disord single epsd severe w psych features	
F324	Major depressv disorder single episode in partial remis	
F325	Major depressive disorder single episode in full remission	
F3281	Premenstrual dysphoric disorder	
F3289	Other specified depressive episodes	
F329	Major depressive disorder single episode unspecified	
F330	Major depressive disorder, recurrent, mild	
F331	Major depressive disorder, recurrent, moderate	

EMR

Condition:	Chronic Depression
Population	Medicaid/Federal and Commonwealth
ICD 10 Codes Considered	Description
F332	Major depressive disorder, recurrent severe without psychotic features
F333	Major depressive disorder, recurrent, severe with psychotic symptoms
F3340	Major depressive disorder, recurrent, in remission unspecified
F3341	Major depressive disorder, recurrent, in partial remission
F3342	Major depressive disorder, recurrent, in full remission
F338	Other recurrent depressive disorders
F339	Major depressive disorder, recurrent, unspecified

ADMINISTRACION DE
SEGUROS DE SALUD

№ 2 3 - 0 0 4 5

Contrato Número

EMR

REVENUE CODE	REVENUE CODE DESCRIPTION	Nº 2 3 USE FOR IP
22	SNF claim paid under PPS	
24	Inpatient Rehabilitation Facility paid under PPS	Contrato Número
100	All inclusive rate-room and board plus ancillary	x
101	All inclusive rate-room and board	x
110	Private medical or general-general classification	x
111	Private medical or general-medical/surgical/GYN	x
112	Private medical or general-OB	x
113	Private medical or general-pediatric	x
114	Private medical or general-psychiatric	x
115	Private medical or general-hospice	x
116	Private medical or general-detoxification	x
117	Private medical or general-oncology	x
118	Private medical or general-rehabilitation	x
119	Private medical or general-other	x
120	Semi-private 2 bed (medical or general)-general classification	x
121	Semi-private 2 bed (medical or general)-medical/surgical/GYN	x
122	Semi-private 2 bed (medical or general)-OB	x
123	Semi-private 2 bed (medical or general)-pediatric	x
124	Semi-private 2 bed (medical or general)-psychiatric	x
125	Semi-private 2 bed (medical or general)-hospice	x
126	Semi-private 2 bed (medical or general)-detoxification	x
127	Semi-private 2 bed (medical or general)-oncology	x
128	Semi-private 2 bed (medical or general)-rehabilitation	x
129	Semi-private 2 bed (medical or general)-other	x
130	Semi-private 3 and 4 beds-general classification	x
131	Semi-private 3 and 4 beds-medical/surgical/GYN	x
132	Semi-private 3 and 4 beds-OB	x
133	Semi-private 3 and 4 beds-pediatric	x
134	Semi-private 3 and 4 beds-psychiatric	x
135	Semi-private 3 and 4 beds-hospice	x
136	Semi-private 3 and 4 beds-detoxification	x
137	Semi-private 3 and 4 beds-oncology	x
138	Semi_private 3 and 4 beds-rehabilitation	x
139	Semi-private 3 and 4 beds-other	x
140	Private (deluxe)-general classification	x
141	Private (deluxe)-medical/surgical/GYN	x
142	Private (deluxe)-OB	x
143	Private (deluxe)-pediatric	x
144	Private (deluxe)-psychiatric	x
145	Private (deluxe)-hospice	x
146	Private (deluxe)-detoxification	x
147	Private (deluxe)-oncology	x
148	Private (deluxe)-rehabilitation	x
149	Private (deluxe)-other	x
150	Room&Board ward (medical or general)-general classification	x
151	Room&Board ward (medical or general)-medical/surgical/GYN	x
152	Room&Board ward (medical or general)-OB	x
153	Room&Board ward (medical or general)-pediatric	x
154	Room&Board ward (medical or general)-psychiatric	x
155	Room&Board ward (medical or general)-hospice	x

REVENUE CODE	REVENUE CODE DESCRIPTION	
156	Room&Board ward (medical or general)-detoxification	X
157	Room&Board ward (medical or general)-oncology	X
158	Room&Board ward (medical or general)-rehabilitation	X
159	Room&Board ward (medical or general)-other	X
160	Other Room&Board-general classification	X
161	Other Room&Board-SNF (Medicaid)	X
162	Other Room&Board-ICF (Medicaid)	X
164	Other Room&Board-sterile environment	X
166	Other Room&Board-Admin Days	X
167	Other Room&Board-self care	X
168	Other Room&Board-Chem Using Preg Women	X
169	Other Room&Board-other	X
170	Nursery-general classification	X
171	Nursery-newborn-level I (routine)	X
172	Nursery-premature-newborn-level II (continuing care)	X
173	Nursery-newborn-level III (intermediate care)-(eff 10/96)	X
174	Nursery-newborn-level IV (intensive care)-(eff 10/96)	X
175	Nursery-neonatal ICU (obsolete eff 10/96)	X
179	Nursery-other	X
180	Leave of absence-general classification	
182	Leave of absence-patient convenience charges-billable	
183	Leave of absence-therapeutic leave	
184	Leave of absence-ICF mentally retarded-any reason	
185	Leave of absence-nursing home (hospitalization)	
189	Leave of absence-other leave of absence	
190	Subacute care - general classification-(eff. 10/97)	
191	Subacute care - level I (eff. 10/97)	
192	Subacute care - level II (eff. 10/97)	
193	Subacute care - level III (eff. 10/97)	
194	Subacute care - level IV (eff. 10/97)	
199	Subacute care - other (eff 10/97)	
200	Intensive care-general classification	X
201	Intensive care-surgical	X
202	Intensive care-medical	X
203	Intensive care-pediatric	X
204	Intensive care-psychiatric	X
206	Intensive care-post ICU; redefined as-intermediate ICU (eff 10/96)	X
207	Intensive care-burn care	X
208	Intensive care-trauma	X
209	Intensive care-other intensive care	X
210	Coronary care-general classification	X
211	Coronary care-myocardial infraction	X
212	Coronary care-pulmonary care	X
213	Coronary care-heart transplant	X
214	Coronary care-post CCU; redefined as-intermediate CCU (eff 10/96)	X
219	Coronary care-other coronary care	X
1000	Behavioral Health Accomodations-general classification	X
1001	Behavioral Health Accomodations-residential-psychiatric	X
1002	Behavioral Health Accomodations-residential-chemical dependency	
1003	Behavioral Health Accomodations-supervised living	

REVENUE CODE	REVENUE CODE DESCRIPTION	USE FOR IP
1004	Behavioral Health Accomodations-halfway house	
1005	Behavioral Health Accomodations-group home	