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DEPARTMENT OF HEALTH

Primary Care (PC) Service Jawda Guidance

Version 7

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Executive Summary

The Department of Health– Abu Dhabi (DOH) is the regulatory body of the healthcare sector in the Emirate of Abu Dhabi and ensures excellence in healthcare for the community by monitoring the health status of its population.

The Emirate of Abu Dhabi is experiencing a substantial growth in the number of hospitals, centers and clinics. This is ranging from school clinics and mobile units to internationally renowned specialist and tertiary academic centers. Although, access and quality of care has improved dramatically over the last couple of decades, mirroring the economic upturn and population boom of Emirate of Abu Dhabi, however challenges remain in addressing further improvements.

The main challenges that are presented with increasingly dynamic population include an aging population with increased expectation for treatment, utilization of technology and diverse workforce leading to increased complexity of healthcare provision in Abu Dhabi. All of this results in an increased and inherent risk to quality and patient safety.

DOH has developed dynamic and comprehensive quality framework in order to bring about improvements across the health sector. This guidance relates to the quality indicators that DOH is mandating be collected and monitor by all Primary healthcare provider in Abu Dhabi.

The guidance sets out the full definition and method of calculation for patient safety and clinical effectiveness indicators. For enquiries about this guidance, please contact jawda@DoH.gov.ae

This document is subjected for review and therefore it is advisable to utilize online versions available on the DOH at all times.

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                                   Version 7: July 2023

About this Guidance

The guidance sets out the definitions and reporting frequency of JAWDA Primary Care (PC) performance indicators. The Department of Health (DoH), with consultation from local and international expertise of chronic disease management has developed Primary Care facilities performance Indicators that are aimed for assessing the degree to which a provider competently and safely delivers the appropriate clinical services to the patient within the optimal period of time.

The Jawda KPI for primary care in this guidance include measures to monitor i.e. how well primary care service providers care for their patients, how often they follow best practices and how effective they are at keeping patients healthy, and how patients feel about their experience at primary care service providers. Healthcare providers are the most qualified professionals to develop and evaluate quality of care for people with chronic conditions; therefore, it is crucial that clinicians retain a leadership position in defining performance among primary care healthcare service providers.

Who is this guidance for?

All healthcare facilities who are licensed by DoH as Primary healthcare service provider or who are providing Primary care Services as part of their portfolio in the Emirate of Abu Dhabi.

All the Jawda KPIs are applicable to patient encounters* with the family medicine consultant or general practitioner. This is in alignment with the DOH primary care standard.

For further details, kindly refer to the following available at
https://www.doh.gov.ae/en/resources/standards and
https://www.doh.gov.ae/en/resources/guidelines

- DOH Standard for Primary Healthcare Services in Emirate of Abu Dhabi (September 2022)
- Scope of Practice Guidelines for Licensed Healthcare Professionals (Family Medicine) (July 2022)
- Scope of Practice for General Practitioner (October 2022)

*The KPI definitions are not applicable to other specialty physician encounters e.g. pediatrician, dental, homeopathic etc.

How do I follow this guidance?

Each provider will nominate one member of staff to coordinate, collect and monitor primary care quality indicators. Primary care provider is required to submit quarterly submission of data through Jawda e-notification system.

Note: Jawda team may use centrally collected claim data submitted by healthcare providers through Shafafiya portal to validate the data submitted by the providers through Jawda portal.

What is the Regulation related to this guidance?
- Legislation establishing the Health Sector
- Department of Health Standard for primary care issued March 2020
  https://www.doh.gov.ae/en/resources/standards
- As per DoH Policy for Quality and Patient Safety issued January 15th 2017, this guidance applies to all DoH Licensed Hospital Healthcare Facilities in the Emirate of Abu Dhabi in accordance with the requirements set out in this Standard.

Type: Cancer screening   **Number: PC001**

KPI Description (title):	**Breast Cancer Screening**
Domain	Prevention and early detection
Sub-Domain	Process
Definition	Percentage of women aged ≥40 to ≤69 years who had at least one mammogram to screen for breast cancer in the 27 months (prior to the end of the reporting quarter)

Calculation	**Numerator:**
	 Women with one or more mammograms to screen for breast cancer in the 27 months (prior to the end of the reporting quarter)
	
	 CPT code for mammogram – 77065, 77066, 77067, 77063
	
	 Numerator Guidance:
	     o *Time frame: 27 months (prior to the end of reporting quarter)*
	             = 3 months (quarter) + 24 months prior
	     o *Mammogram can be performed in the same or different facility*
	
	 Denominator:
	
	 Total number of unique women aged ≥40 to ≤69 in years with a consultation visit/visits during the reporting quarter
	
	 AND
	
	 * who had at least one consultation visit within the 24 months (prior to the beginning of reporting quarter)
	
	 CPT code: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99385, 99386, 99387, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99241, 99242, 99243, 99244, 99245.
	
	 Teleconsultation codes: 01-01, 01-02, 01-03 & 01-04
	
	 HCPCS code: G0438, G0439
	
	 Denominator Guidance:

o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*
o *Face to face or telemedicine consultations should be included*
o *In case of multiple consultation visits within prior months, please consider the **earliest one.***
o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*

Denominator Exclusions:

o Are pregnant or breastfeeding (during the reporting quarter) – **Appendix B (**O00- O9A)

o Are known case or have a previous history of (within the denominator time frame):
- Breast cancer – Z85.3
- Metastatic disease to the breast – C79.81
- Any other cancer arising in the breast – C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50.211,2, C50.219, C50.311, C50.312, C50.319, C50.411, C50.412, C50.419, C50.511, C50.512, C50.519, C50.611, C50.612, C50.619, C50.811, C50.812, C50.819, C50.911, C50.912, C50.919, C50.411, C80.1, D24.1, D24.2, D24.9, D48.60, D48.61, D48.62, D48.7, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, (Not limited to mentioned codes)
- Have breast implants – ICD10: Z98.82, CPT: 19370, 19371 *(not applicable for individuals with implants for cosmetic reasons)*
- Bilateral mastectomy - Z90.10, Z90.11, Z90.12, Z90.13, 19301, 19302, 19303, 19304, 19305, 19306, 19307, 092510, 092520, 092530, G9708

o Have any active breast complaints such as a lump or nipple discharge. (during the reporting quarter)
N63.0, N63.10, N63.11, N63.12, N63.13, N63.14, N63.20, N63.21, N63.22, N63.23, N64.52, N64.0, N64.1, N64.2, N64.3, N64.4, N64.51, N64.52, N64.53, N64.59, N64.81, N60.01, N60.02, N60.09, N60.11, N60.12, N60.19, N60.21, N60.22, N60.29, N60.31, N60.32, N60.39, N60.41, N60.42, N60.49, N60.81, N60.82, N60.89, N60.91, N60.92, N60.99, N61.0, N61.1, R92.0, R92.1, R92.2, R92.8
o Individuals who do not qualify for breast cancer screening insurance benefits

	o Individuals with documented reason for not ordering breast cancer screening (e.g.: refusal) o Already screened individuals – Mammogram performed **prior to the earliest consultation visit in your facility, within the 27 months.** o All ABM Mandate encounters
Reporting Frequency	Quarterly
Unit Measure	% mammogram screening
International comparison if available	DOH Standard for Breast Cancer Screening & Diagnosis https://www.doh.gov.ae/en/Shafafiya/reporting https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool
Desire Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: Cancer screening   **Number: PC002**

KPI Description (title):	Cervical Cancer Screening
Domain	Prevention and early detection
Sub-Domain	Process
Definition	Percentage of women aged ≥25 to ≤65 years who had at least one Pap smear or HPV to screen for cervical cancer

Calculation	**Numerator:**
	
	Women ≥25 to ≤65 years of age who received one PAP smear or HPV test to screen for cervical cancer, during the reporting quarter
	
	OR
	
	Prior to the beginning of reporting quarter:
	
	   o For aged ≥**25-≤29 years:** within the three years prior
	   o For aged ≥**30-≤65 years:** within the five years prior
	
	CPT code for Cervical Cancer Screening:
	
	HPV Test: 87623, 87624, 87625,
	
	CPT: 0500T
	
	PAP Smear: 88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88164, 88165, 88166, 88167, 88174, 88175
	
	Numerator Guidance:
	Cervical Cancer Screening can be performed in the same or different facility
	
	Denominator:
	
	Total number of unique sexually active women (past or present), related symptom free, **aged ≥25-≤29 age in years** with a consultation visit/visits during the reporting quarter
	
	 AND * who had at least one consultation visit within the **three years** (prior to the beginning of reporting quarter)
	
	OR

Total number of unique sexually active women (past or present), related symptom free, aged ≥**30-≤65 age in years** with a consultation visit/visits during the reporting quarter
<div align="center">

AND
</div>

* who had at least one consultation visit within the **five years** (prior to the beginning of reporting quarter)

CPT code: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99385, 99386, 99387, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99241, 99242, 99243, 99244, 99245.

Teleconsultation codes: 01-01, 01-02, 01-03 & 01-04

HCPCS code: G0438, G0439

Denominator Guidance:

- *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*
- *Face to face or telemedicine consultations should be included*
- *In case of multiple consultation visits within prior months, please consider the **earliest one.***
- *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded).*

Denominator Exclusions:

- Are pregnant (during the reporting quarter)–**Appendix B (**O00-O9A**)**

- Patients who had their cervix removed and/or a total hysterectomy with no residual cervix for benign indications or a congenital absence of cervix (within the denominator time frame):
  ICD CODES: Z90.710, Q51.5, Z90.712
  DRG: 131301, 131302, 131303.
  CPT AND HCPCS: 58150, 58152, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58285, 58290, 58291, 58292, 58293, 58294, 57530, G9774**.**

	o Individuals with any active cervix issues or complaints (during the reporting quarter) ICD CODES: N89.8, N93.0, N93.9, N94.10, N72, N82.1, N84.1, N87.X, N88.X, etc…, but not limited to above codes. o Individuals who do not qualify for cervical cancer screening insurance benefits o Individuals with documented reason for not ordering pap smear or HPV (e.g.: refusal) o Already screened individuals – Cervical cancer screening performed **prior to the earliest consultation visit in your facility, within three years** (for ≥25-≤29 years); **five years** (for ≥30-≤65 years) o All ABM Mandate encounters
Reporting Frequency	Quarterly
Unit Measure	% cervical screening
International comparison if available	DOH Standard for Cervical cancer Screening & Diagnosis https://www.doh.gov.ae/en/Shafafiya/reporting https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool
Desire Direction	Higher is better
Data Source	• Centrally collected claim data (KEH)) • Patient medical record

Type: Cancer screening   **Number: PC003**

KPI Description (title):	Colorectal Cancer Screening
Domain	Prevention and early detection
Sub-Domain	Process
Definition	Percentage of adults ≥40 to ≤75 years of age who had colorectal cancer screening through a Fecal Immunochemical Test (FIT) every year or colonoscopy every 10 years
Calculation	**Numerator:** Number of adults ≥40 to ≤75 years of age who had Fecal Immunochemical Test (FIT) during the reporting quarter or within one year (prior to the beginning of reporting quarter) **FIT Test: CPT AND HCPCS: 82274, G0328** **OR** Number of adults ≥40 to ≤75 years of age who had Colonoscopy during the reporting quarter or within 10 years (prior to the beginning of reporting quarter) **Colonoscopy: CPT AND HCPCS: 45378, 45341, 45330, G0104, G0105, G0106, G0120, G0121.** **DRG: 063130.** *Numerator Guidance*: *Colorectal Cancer Screening can be performed in the same or different facility* **Denominator:** Total number of unique adults aged ≥40 to ≤75 years of age**,** related symptom free, with a consultation visit/visits during the reporting quarter **CPT code: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99385, 99386, 99387, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99241, 99242, 99243, 99244, 99245.** **Teleconsultation codes: 01-01, 01-02, 01-03 & 01-04**

HCPCS code: G0438, G0439

Denominator Guidance:

o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*
o *Face to face or telemedicine consultations should be included*
o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*

Denominator exclusions:

o Patients with a history of colorectal cancer or total colectomy (within the denominator time frame):–
   o CPT AND HCPCS CODES: 44150, 44151, 44155, 44156, 44157, 44158, 44210, 44211, 44212, 45121 and G9711.
   o ICD10 CODES: Z85.038, Z85.030, Q42.9, Q42.1, Z90.49.

o Individuals with any active bowel issues or complaints (during the reporting quarter)
   ICD 10 CODES: R19.00 - R19.09, R19.1, R19.2, R19.3, R19.4, R19.5, R19.7, R19.8, K50.10, K50.11X, K50.81X, K51.00, K51.01X, K51.20, K51.21X, K51.3, K51.31X, K51.40, K51.41X, K51.50, K51.51X, K51.80, K5,81X, K51.90, K51.91X, K52.X, K55.X, K56X, K57.2X, K57.3X, K57.4X, K57.5X, K58.1, K59, K59.0, K59.1, K59.2, K59.3, K60.4, K60.5, K61.1, K61.2, K61.3, K62.1-K62.7, K62.89, K63.4, K63.5, K63.8, K63.9, R15.X, R19.1X, R19.4, R19.5, R.19.7, etc..., Not limited to above codes

o Individuals who do not qualify for colorectal cancer screening (FIT) insurance benefits

o Individuals with documented reason for not ordering FIT (e.g.: refusal)

o Already screened individuals –
   o FIT performed **prior to the earliest consultation visit in your facility, within one year**
   o Colonoscopy performed **prior to the earliest consultation visit in your facility, within 10 years**

o All ABM Mandate encounters

Note: In case of colonoscopy refusal, FIT should be encouraged

Reporting Frequency	Quarterly
Unit Measure	% screening for colorectal cancer
International comparison if available	DOH Standard for Colorectal Cancer Screening & Diagnosis https://www.doh.gov.ae/en/Shafafiya/reporting https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool
Desire Direction	Higher is better
Data Source	• Centrally collected claim data (KEH)) • Patient medical record

Type: Mental Health   **Number: PC004**

KPI Description (title):	Depression screening
Domain	Prevention and early detection
Sub-Domain	Process
Definition	Percentage of patients aged ≥18 years and older screened for depression on the date of the encounter or up to 365 days prior to the date of the encounter using an age-appropriate standardized depression screening tool
Calculation	**Numerator:** Number of patients screened for depression on the date of the encounter or up to 365 days prior to the date of the encounter using an age-appropriate standardized tool **Numerator Codes:** **HCPC: G8431, G8510, G0444** **CPT: 96127, 96161, 99483** **CPT: 1220F, 3351F, 3352F, 3353F, 3354F, 3725F** **ICD: Z13.89** *Numerator Guidance:* *Screening – Completion of a clinical or diagnostic tool used to identify people at risk of developing or having a certain disease or condition, even in the absence of symptoms.* *Standardized Depression Screening Tool – A normalized and validated depression screening tool developed for the patient population in which it is being utilized. Examples of standardized depression screening tools include but are not limited to:* *• Adult Screening Tools (18 years and older)* *Patient Health Questionnaire (PHQ-9/ PHQ-2), Beck Depression Inventory (BDI or BDI-II), Center for Epidemiologic Studies Depression Scale (CES-D), Depression Scale (DEPS), Duke Anxiety Depression Scale (DADS), Geriatric Depression Scale (GDS), Cornell Scale for Depression in Dementia (CSDD), PRIME MD-PHQ-2, Hamilton Rating Scale for Depression (HAM-D), Quick Inventory of Depressive Symptomatology Self-Report (QID-SR), Computerized Adaptive Testing Depression Inventory (CAT-DI), and Computerized Adaptive Diagnostic Screener (CAD-MDD)* *• Perinatal Screening Tools* *Edinburgh Postnatal Depression Scale, Postpartum Depression Screening Scale, Patient Health Questionnaire 9 (PHQ-9), Beck Depression Inventory, Beck*

Depression Inventory–II, Center for Epidemiologic Studies Depression Scale, and Zung Self-rating Depression Scale

Denominator:

Total number of unique patients aged ≥18 **age in years** and older at the beginning of the reporting quarter with at least one eligible encounter with any of the following CPT or HCPCS codes during the reporting quarter.

Patient encounter codes (CPT AND HCPCS): 59400, 59510, 59610, 59618, 90791, 90792, 90832, 90834, 90837, 92625, 96105, 96110, 96112, 96116, 96125, 96103, 96101, 96150, 96152, 96153, 96154, 96155, 97161, 97162, 97163, 97165, 97166, 97167, 99078, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99401*, 99402*, 99403*, 99404, 99411, 99412, 99483, 99484, 99492, 99493, 99384*, 99385*, 99386*, 99387*, 99394*, 99395*, 99396*, 99397*, G0101, G0402, G0438, G0439.**

Denominator Guidance:
The intent of the measure is to screen for depression in patients who have never had a diagnosis of depression or bipolar disorder prior to the eligible encounter used to evaluate the numerator.

- o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. The consultations would be with the family medicine consultants or general practitioners.*
- o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*

Denominator Exclusions:

- o Documentation stating the patient has an active diagnosis of depression or has a diagnosed bipolar disorder, therefore screening or follow-up not required - HCPC: G9717

- o Patients who have ever been diagnosed with depression (since ≥18 years of age) -
  F01.51, F32.0, F32.1, F32.2, F32.3, F32.4, F32.5, F32.89, F32.9, F33.0, F33.1, F33.2, F33.3, F33.40, F33.41, F33.42, F33.8, F33.9, F34.1, F34.81, F34.89, F43.21, F43.23, F53, O90.6, O99.340, O99.341, O99.342, O99.343, O99.344, O99.345

	o Patients who have ever been diagnosed with bipolar disorder (since ≥18 years of age) - F31.10, F31.11, F31.12, F31.13, F31.2, F31.30, F31.31, F31.32, F31.4, F31.5, F31.60, F31.61, F31.62, F31.63, F31.64, F31.70, F31.71, F31.72, F31.73, F31.74, F31.75, F31.76, F31.77, F31.78, F31.81, F31.89, F31.9 o Patients with a Documented Reason for not Screening for Depression (Patient refuses to participate) o Documentation of medical reason for not screening patient for depression (e.g., cognitive, functional, or motivational limitations that may impact accuracy of results; patient is in an urgent or emergent situation where time is of the essence and to delay treatment would jeopardize the patient's health status) o Screening for depression not completed, documented reason - G8433 o Individuals who do not qualify for depression screening insurance benefits o Individuals screened for depression in another facility within the past 365 days prior to the date of the encounter. o All ABM Mandate encounters
Reporting Frequency	Quarterly
Unit Measure	% depression screening
International comparison if available	Quality ID #134: Preventive Care and Screening: Screening for Depression and Follow-Up Plan (cms.gov)
Desire Direction	Higher is better
Data Source	• Centrally collected claim data (KEH)) • Patient medical record

Type: Mental Health   **Number: PC005**

KPI Description (title):	Depression follow up care plan
Domain	Clinical effectiveness
Sub-Domain	Process
Definition	Percentage of patients ≥18 years of age with positive screening for depression had a follow-up plan documented on the date of the eligible encounter
Calculation	**Numerator:** Patients from the denominator who had a follow-up plan documented on the date of the encounter or who received follow-up care within 30 days of a positive depression screening finding. **HCPC: G8431** **OR** Follow-up for a positive depression screening must include one or more of the following: ○ Referral to a practitioner who is qualified to diagnose and treat depression ○ Pharmacological interventions ○ Other interventions or follow-up for the diagnosis or treatment of depression **(Follow up E/M code after the visit of depression screening or diagnosis: 99211, 99212, 99213, 99214, 99215, 96150, 96152, 96153, 96154, 96155, 99241, 99242, 99243, 99244, 99245).** *Numerator Guidance:* *Examples of a follow-up plan include but are not limited to:* ○ *Referral to a practitioner or program for further evaluation for depression, for example, referral to a psychiatrist, psychologist, social worker, mental health counselor, or other mental health service such as family or group therapy, support group, depression management program, or other service for treatment of depression* ***(90801/90802/90805/90807/90809/90811/90813/90815 (Psychiatry E&M code); check period within 30 days)*** ○ *Other interventions designed to treat depression, such as behavioral health evaluation, psychotherapy, pharmacological interventions, or additional treatment options (check period within 30 days)*

	Denominator:
	Total number of unique patients aged ≥18 years of age at the beginning of the reporting quarter who were positive for depression screening during the reporting quarter.
	
	CPT: 3353F, 3354F
	
	OR
	
	Patients who have been diagnosed with depression (Pdx or Sdx (Reason for Visit) - F41.8, F01.51, F32.0, F32.1, F32.2, F32.3, F32.4, F32.5, F32.89, F32.9, F33.0, F33.1, F33.2, F33.3, F33.40, F33.41, F33.42, F33.8, F33.9, F34.1, F34.81, F34.89, F43.21, F43.23, F53, O90.6, O99.340, O99.341, O99.342, O99.343, O99.344, O99.345.
	
	AND
	
	Patient encounter codes (CPT AND HCPCS): 59400, 59510, 59610, 59618, 90791, 90792, 90832, 90834, 90837, 92625, 96105, 96110, 96116, 96125, 96103, 96101, 96150, 96152, 96153, 96154, 96155, 97161, 97162, 97163, 97165, 97166, 97167, 99078, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99483, 99484, 99492, 99493, G0438, G0439, G0101, G0402, G0444.
	
	Denominator Exclusions:
	
	    o Screening for depression is documented as negative, a follow-up plan is not required **HCPCS** (**G8510**)
	
	    o Negative screening for depression **CPT: 3351F, 3352F**
	
	    o Patient refuses for the follow up
	
	    o Individuals who do not qualify for insurance benefits
	
	    o All ABM Mandate encounters

Reporting Frequency	Quarterly
Unit Measure	% depression screening

International comparison if available	https://qpp.cms.gov/docs/QPP_quality_measure_specifications/CQM-Measures/2021_Measure_134_MIPSCQM.pdf https://act.abp.org/depression-screening/content/pdf/AAP_coding_factsheet_depression.pdf
Desire Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: Oral Health   **Number: PC006**

KPI Description (title):	Comprehensive oral screening
Domain	Clinical Effectiveness
Sub-Domain	Process
Definition	Percentage of individuals aged ≥2 to ≤75 years of age with dental screening benefits, who received at least one comprehensive oral screening in the 12 months prior to the end of the reporting quarter
Calculation	**Numerator:** Patients in the denominator population who received at least one comprehensive oral screening within 12 months (prior to the end of reporting quarter) **ICD codes: Z13.84, Z01.20, Z01.21 (Principal Diagnosis OR Secondary Diagnosis (Reason for visit)** *Numerator Guidance:* *Timeframe: 12 months (prior to the end of reporting quarter)* *= 3 months (quarter) + 09 months prior* **Denominator:** Total number of unique patients ≥2 to ≤75 years of age, with a consultation visit/visits during the reporting quarter **AND** who had at least one consultation visit within the 09 months (prior to the beginning of reporting quarter) **CPT code: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99385, 99386, 99387, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99241, 99242, 99243, 99244, 99245.** *Denominator Guidance:* o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners or dental general practitioners.*

	o *In case of multiple consultation visits within prior months, please consider the **earliest one.*** o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)* **Denominator Exclusions:** o Current diagnosed conditions - Diseases of oral cavity and salivary glands (ICD codes: K00- K14.9) found in *APPENDIX – C ICD-10 CM CODES (K00- K95)* o Individuals who do not qualify for Comprehensive oral screening insurance benefits o Individuals with documented reason for not ordering Comprehensive oral screening (e.g.: refusal) o Already screened individuals – Comprehensive oral screening performed prior to the earliest consultation visit in your facility, within the 12 months. o All ABM Mandate encounters
Reporting Frequency	Quarterly
Unit Measure	% of dental services
International comparison if available	DOH service requirements for the provision of the periodic comprehensive screening program for adults https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool https://www.ncqa.org/hedis/measures/annual-dental-visit/
Desire Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: Women 's health   **Number: PC007**

KPI Description (title):	**Timeliness of Routine Antenatal Screening Tests**
Domain	Clinical Effectiveness
Sub-Domain	Process
Definition	Percentage of pregnant women, in the first or second trimester, regardless of age, who received all the applicable antenatal period screening tests within the specified time frames, based on recent guidelines

Calculation	**Numerator:** Women in the denominator population who received all the applicable antenatal period screening tests within the specified time frames, based on recent guidelines
	
	    o Hepatitis B specific antigen screening **(CPT code: 87340)**
	    o HIV screening (**CPT code: 87389, 87390, 87391**)
	    o ABO/RH/ABS- (**CPT Code: 86900, 86901,86850**)
	    o Obstetric panel: **80055, 80081**
	
	Numerator Guidance:
	DOH Standard for Routine Antenatal Screening and Care
	
	Numerator Exclusions:
	    o Hepatitis B specific antigen screening (**CPT code: 87340**) (Not applicable for patients with documented immunity to Hepatitis B or active Hepatitis B – **ICD10 CM: B16.0, B16.1, B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11**)
	    o HIV screening (**CPT code: 87389, 87390, 87391**) (Not applicable for patients with a diagnosis of HIV - **ICD10 CM: B20**)
	
	Denominator:
	Total number of unique pregnant women in the first or second trimester, regardless of age, who had at least one antenatal care visit during the reporting quarter.
	
	Diagnosis: All Diagnosis codes of first and Second trimester from the series(O00-O09A) *(see Appendix-B),* **and ICD10 CODES: Z34.01, Z34.02, Z34.81, Z34.82, Z34.91, Z34.92**

	CPT: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245. *Denominator Guidance:* ○ *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.* **Denominator Exclusions** ○ All pregnant women in the third trimester, regardless of age. **Diagnosis: All Diagnosis codes of third trimester from the series(O00-O09A)** *(see Appendix-B)*, **ICD10 CODES: Z3A.27, Z3A.28, Z3A.29, Z3A.30, Z3A.31, Z3A.32, Z3A.33, Z3A.34, Z3A.35, Z3A.36, Z3A.37, Z3A.38, Z3A.39, Z3A.40, Z3A.41, Z3A.42, Z3A.49** ○ All ABM Mandate encounters
Reporting Frequency	Quarterly
Unit Measure	% Routine Antenatal Screening Tests
International comparison if available	https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool
Desire Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: Women's health   **Number: PC008**

KPI Description (title):	**Post-Partum Follow-Up and Care Coordination**
Domain	Clinical Effectiveness
Sub-Domain	Process
Definition	Percentage of women regardless of age, who received breast feeding evaluation & education, post-partum depression screening and glucose screening in their post-partum care visit/s during the reporting quarter
Calculation	<u>**Numerator:**</u> Number of patients receiving all of the following at a post-partum visit: - Breast feeding evaluation and education, including patient-reported breast feeding **ICD10: Z39.1** - Post-partum depression screening **HCPC: G8431, G8432, G8510, G0444** **CPT: 96127, 96161, 99483** **CPT: 1220F, 3351F, 3352F, 3353F, 3354F, 3725F** **ICD: Z13.89** - Post-partum glucose screening for gestational diabetes patients **CPT CODES: 82950, 82951, 82947** **ICD-10 CM: O24.410, O24.414, O24.415, O24.419, O24.420, O24.424, O24.425, O24.429, O24.430, O24.434, O24.435, O24.439** <u>**Denominator:**</u> Total number of unique women, regardless of age, who had a postpartum visit during the reporting quarter. <u>**Post-partum Visit Codes:**</u> **ICD10 CODES: Z39.0, Z39.2** **OR** **CPT: 59430, 0503F** **OR** <u>**Post-partum Visit Criteria:**</u> **CPT CODES: 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 59610, 59618, 59400, 59610, 59430, 59898, 59899 (If billed**

	within 7 and 84 days of billing CPT 59612, 59614, 59618, 59620, 59622, 59612, 59514, 59515, 59409, 59410.
	                    OR
	ICD CODES: Z37.0, Z37.1, Z37.2, Z37.3, Z37.4, Z37.50, Z37.51, Z37.52, Z37.53, Z37.54, Z37.59, Z37.60, Z37.61, Z37.62, Z37.63, Z37.64, Z37.69, Z37.7, Z37.9.
	
	Denominator Guidance:
	• *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners*
	
	• *The postpartum visit should be on or between 7 and 84 days after delivery.*
	
	Denominator Exclusions
	   o All ABM Mandate encounters

Reporting Frequency	Quarterly
Unit Measure	% Post-Partum Follow-Up
International comparison if available	https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool
Desire Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) Patient medical record

Type: Chronic disease management   **Number: PC009**

KPI Description (title):	Diabetes: Hemoglobin A1c (HbA1c) Poor Control Rate (> 9%) or no test result
Domain	Clinical Effectiveness
Sub-Domain	Outcome
Definition	Percentage of diabetics whose most recent HbA1c level was > 9.0 % or who had no test result within 12 months (prior to the end of reporting quarter)

Calculation	**Numerator**
	Patients in the denominator population whose most recent HbA1c level was > 9.0 % OR who had no test result within 12 months (prior to the end of reporting quarter)
	
	HbA1C – CPT – 83036 *(Based on LOINC observation)*
	
	Numerator Guidance:
	Timeframe: 12 months (prior to the end of reporting quarter)
	* = 3 months (quarter) + 09 months prior*
	
	Denominator
	Total number of unique patients (≥18 to ≤75 years of age), with <u>diabetes related outpatient visit/s</u> during the reporting quarter
	
	AND
	
	who had at least 2 <u>diabetes related outpatient visits</u> within 09 months (prior to the reporting quarter)
	
	Denominator Guidance:
	
	    o *Diabetes related outpatient visit is defined as, OP consultation visits with:*
	    o *Principal Diagnosis as Diabetes/ related complications*
	         OR
	    o *Secondary Diagnosis (Reason for visit) as Diabetes/ related complications*
	         OR
	    o *with diabetes medication/ insulin prescription.* **(See Appendix – F)**
	
	CPT Codes: **99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245.**
	
	Teleconsultation codes: **01-01, 01-02, 01-03 & 01-04**

Cpt or teleconsultation codes plus the below diagnoses

ICD 10 Codes: E10, E11, E13, O24 series (See Appendix – D)

- o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*

- o *Face to face or telemedicine consultations should be included*

- o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*

Denominator exclusions
- o Patient with diagnosis of polycystic ovaries, gestational diabetes, or steroid-induced diabetes (within the denominator time frame)
  ICD 10 Codes: **Gestational Diabetes**: **O24.410, O24.414, O24.415, O24.419, O24.420, O24.424, O24.425, O24.429, O24.430, O24.434, O24.435, O24.439.**
  Polycystic Ovaries: **E28.2**
  STERIOD INDUCED DIABETES: **E09.00, E09.01, E09.10, E09.11, E09.21, E09.22, E09.29, E09.311, E09.319, E09.3211, E09.3212, E09.3213, E09.3219, E09.3291, E09.3292, E09.3293, E09.3299, E09.3311, E09.3312, E09.3313, E09.3319, E09.3391, E09.3392, E09.3393, E09.3399, E09.3411, E09.3412, E09.3413, E09.3419, E09.3491, E09.3492, E09.3493, E09.3499, E09.3511, E09.3512, E09.3513, E09.3519, E09.3521, E09.3522, E09.3523, E09.3529, E09.3531, E09.3532, E09.3533, E09.3539, E09.3541, E09.3542, E09.3543, E09.3549, E09.3551, E09.3552, E09.3553, E09.3559, E09.3591, E09.3592, E09.3593, E09.3599, E09.36, E09.37X1, E09.37X2, E09.37X3, E09.37X9, E09.39, E09.40, E09.41, E09.42, E09.43, E09.44, E09.49, E09.51, E09.52, E09.59, E09.610, E09.618, E09.620, E09.621, E09.622, E09.628, E09.630, E09.638, E09.641, E09.649, E09.65, E09.69, E09.8, E09.9**.

- o All ABM Mandate encounters

Reporting Frequency	Quarterly
Unit Measure	**% Hemoglobin A1c >9.0 or no test result**

Desired Direction	Lower is better
International comparison if available	Quality Measures | CMS https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool
Data Source	- Centrally collected claim data (KEH)) - Patient medical record

Type: chronic disease management   **Number: PC010**

KPI Description (title):	Diabetes: Hemoglobin A1c (HbA1c) Good Control Rate (≤7.0%)
Domain	Clinical Effectiveness
Sub-Domain	Outcome
Definition	Percentage of diabetics ≥18 to ≤75 years of age whose most recent HbA1c level was ≤7.0% (good control) within 12 months (prior to the end of reporting quarter)

Calculation	**<u>Numerator</u>**
	
	Patients in the denominator population whose most recent HbA1c level was ≤7.0% within 12 months (prior to the end of reporting quarter)
	
	HbA1C – CPT – 83036 *(Based on LOINC observation)*
	
	Numerator Guidance:
	Timeframe: 12 months (prior to the end of reporting quarter)
	        = 3 months (quarter) + 09 months prior
	
	<u>Denominator</u>
	Total number of unique patients ((≥18 to ≤75 years of age), with <u>diabetes related outpatient visit/s</u> during the reporting quarter
	
	AND
	
	who had at least 2 <u>diabetes related outpatient visits</u> within 09 months (prior to the reporting quarter)
	
	Denominator Guidance:
	    o *Diabetes related outpatient visit is defined as, OP consultation visit with:*
	    o *Principal Diagnosis as Diabetes/ related complications OR*
	    o *Secondary Diagnosis (Reason for visit) as Diabetes/ related complications OR*
	    o *with diabetes medication/ insulin prescription (See Appendix – F)*
	
	CPT Codes: **99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245.**

*Teleconsultation codes***: 01-01, 01-02, 01-03 & 01-04**

Cpt or teleconsultation codes plus the below diagnoses

ICD 10 Codes: E10, E11, E13, O24 series (See Appendix – D)

- o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*

- o *Face to face or telemedicine consultations should be included*

- o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*

Denominator Exclusions
- o Patient with diagnosis of polycystic ovaries, gestational diabetes, or steroid-induced diabetes (within the denominator time frame)

   ICD 10 Codes: **Gestational Diabetes**: **O24.410, O24.414, O24.415, O24.419, O24.420, O24.424, O24.425, O24.429, O24.430, O24.434, O24.435, O24.439.**
   Polycystic Ovaries: **E28.2**
   STERIOD INDUCED DIABETES: **E09.00, E09.01, E09.10, E09.11, E09.21, E09.22, E09.29, E09.311, E09.319, E09.3211, E09.3212, E09.3213, E09.3219, E09.3291, E09.3292, E09.3293, E09.3299, E09.3311, E09.3312, E09.3313, E09.3319, E09.3391, E09.3392, E09.3393, E09.3399, E09.3411, E09.3412, E09.3413, E09.3419, E09.3491, E09.3492, E09.3493, E09.3499, E09.3511, E09.3512, E09.3513, E09.3519, E09.3521, E09.3522, E09.3523, E09.3529, E09.3531, E09.3532, E09.3533, E09.3539, E09.3541, E09.3542, E09.3543, E09.3549, E09.3551, E09.3552, E09.3553, E09.3559, E09.3591, E09.3592, E09.3593, E09.3599, E09.36, E09.37X1, E09.37X2, E09.37X3, E09.37X9, E09.39, E09.40, E09.41, E09.42, E09.43, E09.44, E09.49, E09.51, E09.52, E09.59, E09.610, E09.618, E09.620, E09.621, E09.622, E09.628, E09.630, E09.638, E09.641, E09.649, E09.65, E09.69, E09.8, E09.9**.

- o All ABM Mandate encounters

Reporting Frequency	Quarterly
Unit Measure	**% Hemoglobin A1C ≤7.0%**
Desired Direction	Higher is better
International comparison if available	https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: chronic disease management   **Number: PC011**

KPI Description (title):	**Diabetes: Foot Exam**
Domain	Clinical Effectiveness
Sub-Domain	Process
Definition	Percentage of diabetics who received a Foot exam: visual inspection with either a sensory exam or a pulse exam within 12 months (prior to the end of reporting quarter)

Calculation	**Numerator**
	Patients in the denominator population with a diabetic foot exam done (skin, soft tissue, musculoskeletal, vascular, neurological) within 12 months (prior to the end of reporting quarter)
	
	Foot exam CPT code: (2028F, G9226, G0245, G0246, G0247-New codeset)
	
	Numerator Guidance:
	Timeframe: 12 months (prior to the end of reporting quarter)
	* = 3 months (quarter) + 09 months prior*
	
	Denominator
	Total number of unique patients (≥18 to ≤75 years of age,) with <u>diabetes related outpatient visit/s</u> during the reporting quarter
	
	AND
	
	who had at least 2 <u>diabetes related outpatient visits</u> within 09 months (prior to the reporting quarter)
	
	Denominator Guidance:
	
	   o *Diabetes related outpatient visit is defined as, OP consultation visit with:*
	   o *Principal Diagnosis as Diabetes/ related complications*
	         OR
	   o *Secondary Diagnosis (Reason for visit) as Diabetes/ related complications*
	         OR
	   o *with diabetes medication/ insulin prescription (See Appendix – F)*

CPT Codes: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245.

Teleconsultation codes: 01-01, 01-02, 01-03 & 01-04

Cpt or teleconsultation codes plus the below diagnoses

ICD 10 Codes: E10, E11, E13, O24 series (See Appendix – D)

- o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*

- o *Face to face or telemedicine consultations should be included*

- o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*

Denominator Exclusions
- o Patient with diagnosis of polycystic ovaries, gestational diabetes, or steroid-induced diabetes, amputated lower limb before or during the measurement period. (within the denominator time frame)
  ICD 10 Codes: **Gestational Diabetes**: O24.410, O24.414, O24.415, O24.419, O24.420, O24.424, O24.425, O24.429, O24.430, O24.434, O24.435, O24.439.
  Polycystic Ovaries: E28.2
  STERIOD INDUCED DIABETES: E09.00, E09.01, E09.10, E09.11, E09.21, E09.22, E09.29, E09.311, E09.319, E09.3211, E09.3212, E09.3213, E09.3219, E09.3291, E09.3292, E09.3293, E09.3299, E09.3311, E09.3312, E09.3313, E09.3319, E09.3391, E09.3392, E09.3393, E09.3399, E09.3411, E09.3412, E09.3413, E09.3419, E09.3491, E09.3492, E09.3493, E09.3499, E09.3511, E09.3512, E09.3513, E09.3519, E09.3521, E09.3522, E09.3523, E09.3529, E09.3531, E09.3532, E09.3533, E09.3539, E09.3541, E09.3542, E09.3543, E09.3549, E09.3551, E09.3552, E09.3553, E09.3559, E09.3591, E09.3592, E09.3593, E09.3599, E09.36, E09.37X1, E09.37X2, E09.37X3, E09.37X9, E09.39, E09.40, E09.41, E09.42, E09.43, E09.44, E09.49, E09.51, E09.52, E09.59, E09.610, E09.618, E09.620, E09.621, E09.622, E09.628, E09.630, E09.638, E09.641, E09.649, E09.65, E09.69, E09.8, E09.9.
  AMPUTATED LOWER LIMB BEFORE OR DURING THE MEASUREMENT PERIOD - Z89.411, Z89.412, Z89.419, Z89.421, Z89.422, Z89.429, Z89.431, Z89.432, Z89.439, Z89.441, Z89.442, Z89.449, Z89.511, Z89.512, Z89.519, Z89.521,

	Z89.522, Z89.529, Z89.611, Z89.612, Z89.619, Z89.621, Z89.622, Z89.629. ○ All ABM Mandate encounters
Reporting Frequency	Quarterly
Unit Measure	% foot examination for diabetic patients
International comparison if available	https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool
Desired Direction	Higher is better
Data Source	Centrally collected claim data (KEH) Patient medical record

Type: chronic disease management   **Number: PC012**

KPI Description (title):	Diabetes: Eye Exam
Domain	Clinical Effectiveness
Sub-Domain	Process
Definition	Percentage of patients ≥18 to ≤75 years of age with diabetes and an active diagnosis of retinopathy in any part of the reporting quarter who had a retinal or dilated eye exam by an eye care professional during the reporting quarter **OR** diabetics with no diagnosis of retinopathy in any part of the reporting quarter who had a retinal or dilated eye exam by an eye care professional during the reporting quarter or in the 09 months prior to the reporting quarter
Calculation	**Numerator** Patients with an eye screening for diabetic retinal disease. This includes diabetics who had **one** of the following: - Diabetic with a diagnosis of retinopathy during the reporting quarter and a retinal or dilated eye exam by an eye care professional during the reporting quarter (Procedure codes with ICD) - Diabetic with no diagnosis of retinopathy in the reporting quarter and a retinal or dilated eye exam by an eye care professional during the measurement quarter or within 09 months prior to the reporting quarter (Procedure codes without ICD) **Retinal or Dilated Eye Exam Procedure Codes: 92134, 92275, 92132, 92133, 92136, 92242, 92265, 92270, 92275, 92283, 92284, 92285, 92225, 92226, 92230, 92235, 92260, 92499, 95060, 92240, 92250, 92260.** **CPT: 92227, 92228, 92134** **SERVICE CODE:** 60 **CPT Category II AND HCPCS: '3072F' (NOTE: This code can only be used if the claim/encounter was during the reporting quarter) because it indicates that the patient had "no evidence of retinopathy in the prior year)", S3000, 2022F, 2024F, 2026F, 2023F, 2025F, 2033F, G2102, G2103, G2104, 0380T** **CPT Ophthalmological services: 92002, 92004, 92012, 92014, 92018, 92019**

Numerator Guidance:
- *The eye exam must be performed or reviewed by an ophthalmologist or optometrist, or there must be evidence that fundus photography results were read by a system that provides an artificial intelligence (AI) interpretation.*
- *Eye exam can be performed in the same or different facility*
- *Timeframe: 12 months (prior to the end of reporting quarter) = 3 months (quarter) + 09 months prior*

Denominator

Total number of unique patients ((≥18 to ≤75 years of age), with <u>diabetes related outpatient visit/s</u> during the reporting quarter

AND

who had at least 2 <u>diabetes related outpatient visits</u> within 09 months (prior to the reporting quarter)

Denominator Guidance:

- *Diabetes related outpatient visit is defined as, OP consultation visits with:*
- *Principal Diagnosis as Diabetes/ related complications*
  OR
- *Secondary Diagnosis (Reason for visit) as Diabetes/ related complications*
  OR
- *with diabetes medication/ insulin prescription. (See Appendix – F)*

CPT Codes: **99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245.**

*Teleconsultation codes***: 01-01, 01-02, 01-03 & 01-04**

Cpt or teleconsultation codes plus the below diagnoses

ICD 10 Codes: E10, E11, E13, O24 series (See Appendix – D)

- *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*

- *Face to face or telemedicine consultations should be included*

	o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)* **Denominator Exclusions** o Patient with diagnosis of polycystic ovaries, gestational diabetes, or steroid-induced diabetes (within the denominator time frame) ***ICD 10 Codes***: **Gestational Diabetes**: **O24.410, O24.414, O24.415, O24.419, O24.420, O24.424, O24.425, O24.429, O24.430, O24.434, O24.435, O24.439.** **Polycystic Ovaries**: **E28.2** **STERIOD INDUCED DIABETES**: **E09.00, E09.01, E09.10, E09.11, E09.21, E09.22, E09.29, E09.311, E09.319, E09.3211, E09.3212, E09.3213, E09.3219, E09.3291, E09.3292, E09.3293, E09.3299, E09.3311, E09.3312, E09.3313, E09.3319, E09.3391, E09.3392, E09.3393, E09.3399, E09.3411, E09.3412, E09.3413, E09.3419, E09.3491, E09.3492, E09.3493, E09.3499, E09.3511, E09.3512, E09.3513, E09.3519, E09.3521, E09.3522, E09.3523, E09.3529, E09.3531, E09.3532, E09.3533, E09.3539, E09.3541, E09.3542, E09.3543, E09.3549, E09.3551, E09.3552, E09.3553, E09.3559, E09.3591, E09.3592, E09.3593, E09.3599, E09.36, E09.37X1, E09.37X2, E09.37X3, E09.37X9, E09.39, E09.40, E09.41, E09.42, E09.43, E09.44, E09.49, E09.51, E09.52, E09.59, E09.610, E09.618, E09.620, E09.621, E09.622, E09.628, E09.630, E09.638, E09.641, E09.649, E09.65, E09.69, E09.8, E09.9.** o All ABM Mandate encounters
Reporting Frequency	Quarterly
Unit Measure	% annual retinal or dilated eye examination
Desired Direction	Higher is better
International comparison if available	Quality ID #117 (NQF 0055): Diabetes: Eye Exam (2022) https://qpp.cms.gov/docs/QPP_quality_measure_specifications/CQM-Measures/2020_Measure_117_MIPSCQM.pdf https://ecqi.healthit.gov/ecqm/ec/2021/cms131v9
Data Source	• Centrally collected claim data (KEH) • Patient clinical record

Type: Chronic disease management   **Number: PC013**

KPI Description (title):	Diabetes: Medical Attention for Nephropathy
Domain	Clinical Effectiveness
Sub-Domain	Process
Definition	Percentage of patients ≥18 to ≤75 years of age with diabetes who had a nephropathy screening test or evidence of nephropathy during the reporting quarter or in the 09 months prior to the reporting quarter

Calculation	**Numerator**
	Patients in the denominator population with a screening for nephropathy or evidence of nephropathy within 12 months (prior to the end of reporting quarter)
	
	Codes:
	Any of the following conditions:
	    ○ Microalbuminuria/ Macroalbuminuria test: **CPT: 3060F, 3061F, 3062F, 82043.**
	    ○ Estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ratio (uACR): **CPT: 82570, 82042, 82044, 82565**
	    ○ Documentation of treatment for nephropathy (Principal Diagnosis OR Secondary Diagnosis/ Reason for visit) for:
	    ○ Diabetic Nephropathy: **ICD10 CODES: E10.21, E11.21.**
	    ○ Patient receiving dialysis, patient being treated for ESRD, CRF, ARF, or renal insufficiency:
	    ○ ESRD/ Dialysis: **ICD10: I12.0, I13.11, I13.2, N18.6, Z99. 2**
	    ○ Kidney failure: **ICD10: N17.0, N17.1, N17.2, N17.9, N17.8, N19, N99.0, O90.4.**
	    ○ Chronic kidney disease: **ICD10: N18.1, N18.2, N18.3, N18.4, N18.5, N18.9**
	    ○ **CPT 90935- 90999 (Dialysis Services and Procedures CPT® Code range): 90935, 90937, 90940, 90945, 90947, 90951, 90952, 90953, 90954, 90955, 90956, 90957, 90958, 90959, 90960, 90961, 90962, 90963, 90964, 90965, 90966, 90967, 90968, 90969, 90970, 90989, 90993, 90997, 90999.**
	    ○ Treatment for nephropathy: **CPT: 3066F**
	    ○ Green rain codes for angiotensin converting enzyme (ACE) inhibitor or angiotensin receptor blocker (ARB) therapy, **HCPCS: G8506**

Numerator Guidance:
Timeframe: 12 months (prior to the end of reporting quarter)
      = 3 months (quarter) + 09 months prior

Denominator
Total number of unique patients ((≥18 to ≤75 years of age), with diabetes related outpatient visit/s during the reporting quarter

AND

who had at least 2 diabetes related outpatient visits within 09 months
(prior to the reporting quarter)

Denominator Guidance:

  o *Diabetes related outpatient visit is defined as, OP consultation*
     visits with:
  o *Principal Diagnosis as Diabetes/ related complications*
     OR
  o *Secondary Diagnosis (Reason for visit) as Diabetes/ related*
     complications
     OR
  o *with diabetes medication/ insulin prescription. (See Appendix*
     – F)

CPT Codes: 99201, 99202, 99203, 99204, 99205, 99211, 99212,
99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245.

Teleconsultation codes: 01-01, 01-02, 01-03 & 01-04

Cpt or teleconsultation codes plus the below diagnoses

ICD 10 Codes: E10, E11, E13, O24 series (See Appendix – D)

  o *The consultations should be by the same provider, however can be by*
     the same or different Primary care physician/s. These would be family
     medicine consultants or general practitioners.

  o *Face to face or telemedicine consultations should be included*

  o *In case of multiple consultation visits within the reporting quarter,*
     please consider any visit after applying the exclusion criteria (e.g. ABM
     mandate encounters excluded)

Denominator Exclusions

	o Patient with diagnosis of polycystic ovaries, gestational diabetes, or steroid-induced diabetes (within the denominator time frame) ***ICD 10 Codes***: **Gestational Diabetes**: **O24.410, O24.414, O24.415, O24.419, O24.420, O24.424, O24.425, O24.429, O24.430, O24.434, O24.435, O24.439.** **Polycystic Ovaries**: **E28.2** **STERIOD INDUCED DIABETES**: **E09.00, E09.01, E09.10, E09.11, E09.21, E09.22, E09.29, E09.311, E09.319, E09.3211, E09.3212, E09.3213, E09.3219, E09.3291, E09.3292, E09.3293, E09.3299, E09.3311, E09.3312, E09.3313, E09.3319, E09.3391, E09.3392, E09.3393, E09.3399, E09.3411, E09.3412, E09.3413, E09.3419, E09.3491, E09.3492, E09.3493, E09.3499, E09.3511, E09.3512, E09.3513, E09.3519, E09.3521, E09.3522, E09.3523, E09.3529, E09.3531, E09.3532, E09.3533, E09.3539, E09.3541, E09.3542, E09.3543, E09.3549, E09.3551, E09.3552, E09.3553, E09.3559, E09.3591, E09.3592, E09.3593, E09.3599, E09.36, E09.37X1, E09.37X2, E09.37X3, E09.37X9, E09.39, E09.40, E09.41, E09.42, E09.43, E09.44, E09.49, E09.51, E09.52, E09.59, E09.610, E09.618, E09.620, E09.621, E09.622, E09.628, E09.630, E09.638, E09.641, E09.649, E09.65, E09.69, E09.8, E09.9.** **DOCUMENTATION OF KIDNEY TRANSPLANT: ICD10: T86.10, T86.11, T86.12, T86.13, T86.19, Z48.22, Z94.0.** o All ABM Mandate encounters
Reporting Frequency	Quarterly
Unit Measure	% annual nephropathy screening test
Desired Direction	Higher is better
International comparison if available	https://qpp.cms.gov/docs/QPP_quality_measure_specifications/CQM-Measures/2020_Measure_119_MIPSCQM.pdf https://ecqi.healthit.gov/ecqm/ec/2022/cms134v10 https://mdinteractive.com/mips_quality_measure/2022-mips-quality-measure-119
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: Chronic disease management   **Number: PC014**

KPI Description (title):	Controlling High Blood Pressure
Domain	Effectiveness
Sub-Domain	outcome
Definition	Percentage of patients ≥18 to ≤85 years of age who had a diagnosis of essential hypertension overlapping the measurement period and whose most recent blood pressure was adequately controlled (< 140/90 mmHg) during the reporting quarter
Calculation	**Numerator:** Patients whose most recent blood pressure is adequately controlled (systolic blood pressure < 140 mmHg **and** diastolic blood pressure < 90 mmHg) during the reporting quarter *Numerator Guidance:* o *If no blood pressure is recorded during the measurement period, the patient's blood pressure is assumed "not controlled."* o *If there are multiple blood pressure readings on the same day, use the reading with both the systolic and diastolic being in the normal range (numerator values) as the most recent blood pressure reading.* o *The most recent blood pressure reading during the reporting quarter can be in the same or different facility.* **BP ARTERIAL READING: CPT: 93784, 93786, 93788, 93790.** **Denominator:** Total number of unique patients ≥18 to ≤85 years of age, with <u>hypertension related outpatient visit/s</u> during the reporting quarter **AND** who had at least 2 <u>hypertension related outpatient visits</u> within 09 months (prior to the reporting quarter) *Denominator Guidance:* o *Hypertension related outpatient visit is defined as, OP consultation visits with:*

	o *Principal Diagnosis as Hypertension*
	       OR
	o *Secondary Diagnosis (Reason for visit) as Hypertension*
	       OR
	o *with antihypertensives prescription. (See Appendix – G)*
	
	o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*
	
	o *Face to face or telemedicine consultations should be included*
	
	o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*
	
	CPT Codes: **99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99385, 99386, 99387, 99395, 99396, 99397.**
	
	Teleconsultation codes: **01-01, 01-02, 01-03 & 01-04**
	
	Cpt or teleconsultation codes plus the essential hypertension diagnoses
	
	Denominator Exclusions:
	
	    o Documentation of End stage renal disease (ESRD): **ICD10: N18.6** (within the denominator time frame)
	
	    o Renal transplant (before or during the reporting quarter)
	    ICD codes: **T86.10, T86.11, T86.12, T86.13, T86.19, Z48.22, Z94.0, CPT codes: 90935- 90999 (Dialysis Services and Procedures CPT® Code range) 90935, 90937, 90940, 90945, 90947, 90951, 90952, 90953, 90954, 90955, 90956, 90957, 90958, 90959, 90960, 90961, 90962, 90963, 90964, 90965, 90966, 90967, 90968, 90969, 90970, 90989, 90993, 90997, 90999.**
	
	    o Pregnancy (during the reporting quarter) *Appendix B (O00- O9A)*
	
	    o All ABM Mandate encounters

Reporting Frequency	Quarterly

Unit Measure	Percentage.
International comparison if available	https://mdinteractive.com/MIPS_Family_Practice
Desired Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: Chronic disease management   **Number: PC015**

KPI Description (title):	Hypertension: Annual dyslipidemia screening rate
Domain	Effectiveness
Sub-Domain	outcome
Definition	Percentage of patients ≥18 to ≤85 years of age who had a diagnosis of essential hypertension and who had a complete lipid profile performed for screening of dyslipidemia

Calculation	**Numerator:**
	Patients in the denominator population who had a complete lipid profile performed for screening of dyslipidemia within 12 months (prior to the end of reporting quarter)
	
	CPT: 80061 *(Based on LOINC observation)*
	
	Numerator Guidance:
	Timeframe: 12 months (prior to the end of reporting quarter)
	= 3 months (quarter) + 09 months prior
	
	Denominator:
	Total number of unique patients ≥18 to ≤85 years of age, with <u>hypertension related outpatient visit/s</u> during the reporting quarter
	
	AND
	
	who had at least 2 <u>hypertension related outpatient visits</u> within 09 months (prior to the reporting quarter)
	
	Denominator Guidance:
	
	• *Hypertension related outpatient visit is defined as, OP consultation visits with:*
	• *Principal Diagnosis as Hypertension*
	      OR
	• *Secondary Diagnosis (Reason for visit) as Hypertension*
	      OR
	• *with antihypertensives prescription. (See Appendix – G)*
	
	• *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*

- *Face to face or telemedicine consultations should be included*

- *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*

CPT Codes: **99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99385, 99386, 99387, 99395, 99396, 99397.**

Teleconsultation codes: **01-01, 01-02, 01-03 & 01-04**

Cpt or teleconsultation codes plus the essential hypertension diagnoses

Denominator Exclusions:

- Documentation of End stage renal disease (ESRD): **ICD10: N18.6** (within the denominator time frame)

- Renal transplant (before or during the reporting quarter) **ICD codes: T86.10, T86.11, T86.12, T86.13, T86.19, Z48.22, Z94.0, CPT codes: 90935- 90999 (Dialysis Services and Procedures CPT® Code range) 90935, 90937, 90940, 90945, 90947, 90951, 90952, 90953, 90954, 90955, 90956, 90957, 90958, 90959, 90960, 90961, 90962, 90963, 90964, 90965, 90966, 90967, 90968, 90969, 90970, 90989, 90993, 90997, 90999.**

- Pregnancy (during the reporting quarter) *Appendix B (O00- O9A)*

- All ABM Mandate encounters

Reporting Frequency	Quarterly
Unit Measure	Percentage.
International comparison if available	https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool
Desired Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: Chronic disease management   **Number: PC016**

KPI Description (title):	Hypertension: Medical Attention for Nephropathy
Domain	Clinical Effectiveness
Sub-Domain	Process
Definition	Percentage of patients ≥18 to ≤85 years of age with hypertension who had a nephropathy screening test or evidence of nephropathy during the reporting quarter or in the 09 months prior to the reporting quarter
Calculation	**Numerator:** Patients in the denominator population with a screening for nephropathy or evidence of nephropathy within 12 months (prior to the end of reporting quarter) **Codes:** **Any of the following conditions:** o Microalbuminuria/ Macroalbuminuria test: **CPT: 3060F, 3061F, 3062F, 82043.** o Estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ratio (uACR): **CPT: 82570, 82042, 82044, 82565** o Documentation of treatment for nephropathy (Principal Diagnosis OR Secondary Diagnosis/ Reason for visit) for: o Diabetic Nephropathy: **ICD: E10.21, E11.21** o Patient receiving dialysis, patient being treated for ESRD, CRF, ARF, or renal insufficiency: o ESRD/ Dialysis: **ICD10: I12.0, I13.11, I13.2, N18.6, Z99. 2** o Kidney failure: **ICD10: N17.0, N17.1, N17.2, N17.9, N17.8, N19, N99.0, O90.4.** o Chronic kidney disease: **ICD10: N18.1, N18.2, N18.3, N18.4, N18.5, N18.9** o **CPT 90935- 90999 (Dialysis Services and Procedures CPT® Code range): 90935, 90937, 90940, 90945, 90947, 90951, 90952, 90953, 90954, 90955, 90956, 90957, 90958, 90959, 90960, 90961, 90962, 90963, 90964, 90965, 90966, 90967, 90968, 90969, 90970, 90989, 90993, 90997, 90999.** o Treatment for nephropathy: **CPT: 3066F** o Green rain codes for angiotensin converting enzyme (ACE) inhibitor or angiotensin receptor blocker (ARB) therapy, **HCPCS: G8506** **Denominator:**

Total number of unique patients ≥18 to ≤85 years of age, with hypertension related outpatient visit/s during the reporting quarter

AND

who had at least 2 hypertension related outpatient visits within 09 months (prior to the reporting quarter)

Denominator Guidance:

- *Hypertension related outpatient visit is defined as, OP consultation visits with:*
- *Principal Diagnosis as Hypertension*
    OR
- *Secondary Diagnosis (Reason for visit) as Hypertension*
    OR
- *with antihypertensives prescription. with antihypertensives prescription. (See Appendix – G)*

- *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*

- *Face to face or telemedicine consultations should be included*

- *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*

CPT Codes: **99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99385, 99386, 99387, 99395, 99396, 99397.**

Teleconsultation codes: **01-01, 01-02, 01-03 & 01-04**

Cpt or teleconsultation codes plus the essential hypertension diagnoses

Denominator Exclusions:

- DOCUMENTATION OF KIDNEY TRANSPLANT: **ICD10: T86.10, T86.11, T86.12, T86.13, T86.19, Z48.22, Z94.0**
  (within the denominator time frame)

	○ Pregnancy (during the reporting quarter) *Appendix B (O00- O9A)* ○ All ABM Mandate encounters
Reporting Frequency	Quarterly
Unit Measure	% annual nephropathy screening test
International comparison if available	https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool
Desired Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: Disease management   **Number: PC017**

KPI Description (title):	**Screening for Osteoporosis for Women Aged 60 Years of Age and Above**
Domain	Clinical Effectiveness
Sub-Domain	Process
Definition	Percentage of female patients aged 60 years of age and above who ever had a central dual-energy X-ray absorptiometry (DXA) to check for osteoporosis

Calculation	**Numerator:**
	The number of women who have documentation in their medical record of having received a DXA test of the hip or spine (during the performance period)
	CPT Code: 77080, 77078, 77081, 77085, 77086.
	OR
	Patient with documented results of a central Dual energy X-Ray Absorptiometry (DXA) ever being performed **HCPCS: (G8399)**
	
	Denominator:
	Total number of unique female patients aged 60 years of age and above during the reporting quarter
	AND
	who had at least 2 outpatient visits within past two years (prior to the reporting quarter)
	
	Denominator Guidance:
	   o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*
	   o *Face to face or telemedicine consultations should be included*
	   o *In case of multiple consultation visits within prior months, please consider the earliest one.*
	   o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*
	
	PATIENT ENCOUNTER DURING THE PERFORMANCE PERIOD (CPT AND HCPCS): 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99385, 99386, 99387, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, AND G0438, G0439.
	
	Teleconsultation codes: 01-01, 01-02, 01-03 & 01-04

	Denominator Exclusions: o Diagnosis of osteoporosis on date of encounter (ICD-10-CM): **M81.0, M81.6, M81.8, and** *APPENDIX E (M80.0 to M80.8)* **codes** o Individuals who do not qualify for osteoporosis screening insurance benefits o Individuals with documented reason for not ordering osteoporosis screening (e.g.: refusal) o All ABM Mandate encounters
Reporting Frequency	Quarterly
Unit Measure	% Osteoporosis Screening
International comparison if available	https://qpp.cms.gov/docs/QPP_quality_measure_specifications/CQM-Measures/2020_Measure_039_MIPSCQM.pdf https://www.ncqa.org/wp-content/uploads/2019/02/20190208_03_OTO.pdf
Desired Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: child health   **Number: PC018**

KPI Description (title):	**Childhood Immunization Status**
Domain	Clinical Effectiveness
Sub-Domain	Process
Definition	Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV), one measles, mumps and rubella (MMR); three or four H influenza type B (Hib); three hepatitis B (Hep B); one chicken pox (VZV); four pneumococcal conjugate (PCV); and two or three rotavirus (RV); by their second birthday
Calculation	**Numerator:** Children who have evidence showing they received recommended vaccines, had documented history of the illness, had a seropositive test result, or had an allergic reaction to the vaccine by their second birthday *Recommended vaccines:* *o Four diphtheria, tetanus and acellular pertussis (DTaP);* *o three polio (IPV),* *o one measles, mumps and rubella (MMR);* *o three or four H influenza type B (Hib);* *o three hepatitis B (Hep B);* *o one chicken pox (VZV);* *o four pneumococcal conjugate (PCV);* *o two or three rotavirus (RV);* *Numerator Guidance:* ○ *Vaccines administered on the second birthday will not count towards inclusion in the numerator* ○ *Vaccinations administered can be in the same or another facility.* ○ *Include referral of children to facilities that are offering Well Child Services consistent with the Government Mandated Funds requirements (for those who do not have insurance coverage).* **ICD CODE: Z23** **AND** **CPT codes: Administration code: 90460, 90461, 90471, 90472, 90473, 90474** **AND**

SHAFAFIYA DRUG CODES:

L87-0058-05705-01	F69-5313-05694-01	F69-6023-06225-01	M70-1647-05722-02
B61-2511-05743-01	F69-5313-05694-02	I72-4303-06128-01	M70-1647-05722-01
CH8-9821-10174-02	M70-5312-05695-01	M39-2295-05708-01	B61-5463-05726-01
F69-0666-05696-01	M39-1423-05699-01	B61-0063-05709-01	K22-5462-05727-01
F69-4200-05724-01	F69-8842-08744-01	I72-4058-05710-01	B61-2510-05701-01
F74-7821-07678-02	F69-4658-05749-01	I73-5810-05763-01	B61-1421-05701-01
U66-7821-07678-01	I72-4659-05750-01	I73-8317-08088-01	L88-2510-05702-01
M70-2533-05687-01	M39-4679-05752-01	I73-5448-05762-01	M39-1422-05700-01
B19-0369-05745-01	K22-4681-05753-01	M70-2366-05711-01	M39-1421-05703-01
F69-2535-05698-01	I72-3218-05751-01	M70-2366-05711-02	K22-1220-05692-01
K22-4072-01486-01	I72-0463-05754-01	M70-2315-05712-01	B61-1220-05693-01
L88-4077-01487-01	N73-5149-05756-01	M70-2315-05713-01	M86-2542-05729-01
B61-5153-05689-01	L88-5151-05757-02	M70-2315-05714-03	F69-1957-05730-01
N73-6028-05690-01	L88-5151-05757-01	M70-2315-05714-02	F69-1957-05731-01
K22-1219-05690-01	M39-5150-05758-03	M70-2315-05714-01	M70-4289-06130-02
B61-1219-05691-01	M39-5150-05758-01	I72-5443-05715-01	M70-4289-06130-01
L88-6162-06352-01	M39-5150-05758-02	I72-5443-05716-01	M39-3133-06133-01
L86-6161-06352-01	M70-5446-05761-02	B61-0479-05717-01	B61-4662-05734-01
M70-2537-01462-01	M70-5446-05761-01	L88-0480-05718-01	B61-5296-06120-01
L87-5301-05697-01	N73-6026-06228-01	I72-2316-05719-01	M39-6948-07021-01
L88-5159-05706-01	N73-6027-06229-01	I72-2316-05720-01	I72-3068-06122-01
B61-1420-05704-01	N73-6027-06229-02	M70-1647-05721-02	L88-3914-06131-01
B61-1219-05704-01	H94-1765-05688-01	M70-1647-05721-01	

Vaccine drug codes: 90296, 90696, 90697, 90698, 90700, 90702, 90714, 90715, 90723, 90389, 90713, 90707, 90710, 90644, 90647, 90648, 90748, 90396, 90716, 90670, 4040F, G0009, G8864, G9279, 90632, 90633, 90634, 90636, 3215F, 4148F, 4155F, 90680, 90681, 90630, 90653, 90654, 90655, 90656, 90657, 90658, 90660, 90661, 90662, 90664, 90666, 90667, 90668, 90672, 90673, 90674, 90682, 90685, 90686, 90687, 90688, 90756.
HCPCS Codes: 4035F, 4037F, 4274F, G0008, G8482, Q2034, Q2039

Denominator:
Total number of children who have their second birthday and a consultation visit during the reporting quarter

AND

who had at least one consultation visit within 2 years (prior to the beginning of reporting quarter)

	Denominator Guidance:
	   o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*
	   o *Face to face or telemedicine consultations should be included*
	   o *In case of multiple consultation visits within prior months, please consider the* **earliest one.**
	   o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*
	
	CONSULTATION VISITS: CPT CODES: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99381, 99382, 99383, 99391, 99392, 99401, 99402, 99403, 99404, 99411, 99412 etc...
	
	Teleconsultation codes: **01-01, 01-02, 01-03 & 01-04**
	
	HCPCS: **G0438, G0439**.
	
	Denominator Exclusion
	   o All ABM Mandate encounters, except Well Child and Immunization Mandate encounters.

Reporting Frequency	Quarterly
Unit Measure	% Children who received vaccines by their second birthday
International comparison if available	https://ecqi.healthit.gov/ecqm/ec/2022/cms117v10
Desired Direction	Higher is better
Data Source	• Centrally collected Immunization Registry (IIS) • Patient medical record

Type: Child health   **Number: PC019**

KPI Description (title):	Iron deficiency Screening in children aged from 1 year to 5 years
Domain	Prevention and early detection
Sub-Domain	Process
Definition	Percentage of Children from ≥1 year to ≤5 years who had hematocrit and /or hemoglobin completed test for iron deficiency screening, as per the age criteria.
Calculation	**Numerator:** Children from the denominator who had hematocrit and /or hemoglobin completed test for iron deficiency screening. **CPT Codes: 85013, 85014, 85018, 85025, 85027** *(Based on LOINC observation)* ***Performance Met Criteria:*** *For ≥ 1year age - < 2years: at least 1* *For ≥ 2 years age - < 3 years: at least 3 cumulative* *For ≥ 3 years age - < 4 years: at least 4 cumulative* *For ≥ 4 years age - < 5 years: at least 5 cumulative* *For 5 years age: at least 6 cumulative* *Numerator Guidance:* • *Please refer DOH Standard Well Child visits (0-6 years)* • *Screening can be done in the same or another facility.* • *Include referral of children to facilities that are offering Well Child Services consistent with the Government Mandated Funds requirements (for those who do not have insurance coverage).* **Denominator:** Total number of children ≥ 1 year to ≤ 5 years during the reporting quarter and who have a well-child visit during the reporting quarter **AND** who had at least one well child visit within prior years (prior to the beginning of reporting quarter) *Denominator Guidance:*

	o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*
	o *Face to face or telemedicine consultations should be included*
	o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*
	CONSULTATION VISITS: CPT CODES: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99381, 99382, 99383, 99391, 99392, 99393, 99401, 99402, 99403, 99404, 99411, 99412 etc...
	Teleconsultation codes: **01-01, 01-02, 01-03 & 01-04**
	HCPCS: **G0438, G0439.**
	Denominator Exclusions:
	o **DENTAL VISITS: USCLS CODES: 01301, 01401, 01601, 01901, 05201, 05202, 05209, 13101, 13102, 13103, 13104, 13109, 93111, 93112, 93119**
	o All ABM Mandate encounters, **except Well Child and Immunization Mandate encounters.**
Reporting Frequency	Quarterly
Unit Measure	Percentage.
International comparison if available	DOH Standard Well Child visits (0-6 years) https://www.ncqa.org/hedis/measures/ https://www.ahrq.gov/ https://www.qualityforum.org/QPS/QPSTool
Desired Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: Child health   **Number: PC020**

KPI Description (title):	**Structured developmental Screening in children aged from 18 to 30 months**
Domain	Prevention and early detection
Sub-Domain	Process
Definition	Percentage of children from ≥18 to ≤ 30 months of age who had the structured screening for developmental milestones for the age.
Calculation	**Numerator:** Children from the denominator who had the structured screening for developmental milestones for the age. *Performance Met Criteria:* *For ≥18 months - < 19 months: at least 1* *For ≥19 months - ≤ 30 months age: at least 2 cumulative* *Numerator Guidance:* • *Developmental milestones screening for the age include (but not limited to): Observation of parent-child interaction, Social-Emotional, Communicative, Cognitive, Physical Development. Please refer DOH Standard Well Child visits (0-6 years)* • *Please refer DOH Standard Well Child visits (0-6 years)* • *Screening can be done in the same or another facility.* • *Include referral of children to facilities that are offering Well Child Services consistent with the Government Mandated Funds requirements (for those who do not have insurance coverage).* **ICD-10 CM Codes: Z13.4** **CPT Codes: 96110, 96111,** **HCPCS Codes: G9966, G9967, H2037** **Denominator:** Total number of children ≥18 to ≤30 months of age during the reporting quarter and who have a well-child visit during the reporting quarter **AND** who had at least one well-child visit within prior years (prior to the beginning of reporting quarter)

	CPT code: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99381, 99382, 99391, 99392, 99401, 99402, 99403, 99404, 99411, 99412, G0438, G0439 etc… *Teleconsultation codes***: 01-01, 01-02, 01-03 & 01-04** *Denominator Guidance:* o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.* o *Face to face or telemedicine consultations should be included* o *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)* **Denominator Exclusions:** o Dental consultation visits – **USCLS codes: 01301, 01401, 01601, 01901, 05201, 05202, 05209, 13101, 13102, 13103, 13104, 13109, 93111, 93112, 93119** o Current diagnosed conditions – **ICD-10 CM codes: R62.0, R62.50, R62.59, F88, F80.89, F80.9, F81.89, F81.9, F82, F84.8, F84.9, F80.4, F89, R41.89, R41.9** o All ABM Mandate encounters, **except Well Child and Immunization Mandate encounters.**
Reporting Frequency	Quarterly
Unit Measure	Percentage
International comparison if available	DOH Standard Well Child visits (0-6 years) https://www.cdc.gov/ncbddd/childdevelopment/screening.html
Desired Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: Child health   **Number: PC021**

KPI Description (title):	**Autism Screening in children aged from 18 to 24 months**
Domain	Prevention and early detection
Sub-Domain	Process
Definition	Percentage of children from ≥18 to ≤ 24 months of age who had the screening for Autism using evidence-based tool.
Calculation	**Numerator:** Children from the denominator who had the screening for Autism using evidence-based tool (e.g. mChat screening form) **ICD-10CM: Z13.4** **CPT: 96110** **HCPCS: G9966, G9967, H2037, S3870** ***Performance Met Criteria:*** *For ≥18 months - < 19months: at least 1* *For ≥ 19 months - ≤ 24 months age: at least 2 cumulative* ***Numerator Guidance:*** • *Please refer DOH Standard Well Child visits (0-6 years)* • *Screening can be done in the same or another facility.* • *Include referral of children to facilities that are offering Well Child Services consistent with the Government Mandated Funds requirements (for those who do not have insurance coverage).* **Denominator:** Total number of children ≥18 to ≤24 months of age during the reporting quarter and who have a well child visit during the reporting quarter **AND** who had at least one well child visit within prior years (prior to the beginning of reporting quarter) **CPT code: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99381, 99382, 99391, 99392, 99401, 99402, 99403, 99404, 99411, 99412, G0438, G0439 etc...** ***Teleconsultation codes***: **01-01, 01-02, 01-03 & 01-04**

	Denominator Guidance:
	○ *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.*
	○ *Face to face or telemedicine consultations should be included*
	○ *In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)*
	Denominator Exclusions:
	○ Dental consultation visits – **USCLS codes: 01301, 01401, 01601, 01901, 05201, 05202, 05209, 13101, 13102, 13103, 13104, 13109, 93111, 93112, 93119**
	○ Current diagnosed conditions (**ICD-10 CM: F84.0 - Autistic** disorder)
	○ All ABM Mandate encounters, except Well Child and Immunization Mandate encounters.
Reporting Frequency	Quarterly
Unit Measure	Percentage
International comparison if available	DOH Standard Well Child visits (0-6 years) https://www.cdc.gov/ncbddd/autism/hcp-screening.html
Desired Direction	Higher is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Type: Referral   **Number: PC022**

KPI Description (title):	Outpatient Referral rate
Domain	Efficiency
Sub-Domain	Process
Definition	Percentage of patient outpatient visits by primary care physicians that resulted in a referral for services or a specialist/consultant visit during the reporting quarter
Calculation	<u>**Numerator:**</u> Number of outpatient visits that resulted in a referral to the specialists/consultants. *Numerator Guidance:* *Count all outpatient visits with referrals regardless of service lines, excluding same specialty (e.g. Family Medicine to Family Medicine /GP clinics).* <u>**Denominator:**</u> Total numbers of outpatient visits by the primary care physicians during the reporting quarter. **Patient encounter during the reporting quarter (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99385, 99386, 99387, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412** *Denominator Guidance:* o *The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.* <u>**Denominator Exclusions:**</u> o Dental visits - **USCLS codes: 01301, 01401, 01601, 01901, 05201, 05202, 05209, 13101, 13102, 13103, 13104, 13109, 93111, 93112, 93119** o All ABM Mandate encounters
Reporting Frequency	Quarterly
Unit Measure	Percentage

International comparison if available	https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/1108675 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5209847/ https://www.england.nhs.uk/statistics/wp-content/uploads/sites/2/2021/06/Monthly-Referral-Return-MRR-Guidance-v0.3.pdf
Desired Direction	Lower is better
Data Source	• Centrally collected claim data (KEH) • Patient medical record

Appendix A – CPT Category II codes

0001F	1070F	2028F	3126F	3376F	4008F	4153F	4328F
0005F	1071F	2029F	3130F	3378F	4010F	4155F	4330F
0012F	1090F	2030F	3132F	3380F	4011F	4157F	4340F
0014F	1091F	2031F	3140F	3382F	4012F	4158F	4350F
0015F	1100F	2035F	3141F	3384F	4013F	4159F	4400F
0500F	1101F	2040F	3142F	3386F	4014F	4163F	4450F
0501F	1110F	2044F	3150F	3388F	4015F	4164F	4470F
0502F	1111F	2050F	3155F	3390F	4016F	4165F	4480F
0503F	1116F	2060F	3160F	3394F	4017F	4167F	4481F
0505F	1118F	3006F	3170F	3395F	4018F	4168F	4500F
0507F	1119F	3008F	3200F	3450F	4019F	4169F	4510F
0509F	1121F	3011F	3210F	3451F	4025F	4171F	4525F
0513F	1123F	3014F	3215F	3452F	4030F	4172F	4526F
0514F	1124F	3015F	3216F	3455F	4033F	4174F	4540F
0516F	1125F	3016F	3218F	3470F	4035F	4175F	4541F
0517F	1126F	3017F	3220F	3471F	4037F	4176F	4550F
0518F	1127F	3018F	3230F	3472F	4040F	4177F	4551F
0519F	1128F	3019F	3250F	3475F	4041F	4178F	4552F
0520F	1130F	3020F	3260F	3476F	4042F	4179F	4553F
0521F	1134F	3021F	3265F	3490F	4043F	4180F	4554F
0525F	1135F	3022F	3266F	3491F	4044F	4181F	4555F
0526F	1136F	3023F	3267F	3492F	4045F	4182F	4556F
0528F	1137F	3025F	3268F	3493F	4046F	4185F	4557F
0529F	1150F	3027F	3269F	3494F	4047F	4186F	4558F
0535F	1151F	3028F	3270F	3495F	4048F	4187F	4559F
0540F	1152F	3035F	3271F	3496F	4049F	4188F	4560F
0545F	1153F	3037F	3272F	3497F	4050F	4189F	4561F
0550F	1157F	3038F	3273F	3498F	4051F	4190F	4562F
0551F	1158F	3040F	3274F	3500F	4052F	4191F	4563F
0555F	1159F	3042F	3278F	3502F	4053F	4192F	5005F
0556F	1160F	3044F	3279F	3503F	4054F	4193F	5010F
0557F	1170F	3045F	3280F	3510F	4055F	4194F	5015F
0575F	1175F	3046F	3281F	3511F	4056F	4195F	5020F
0580F	1180F	3048F	3284F	3512F	4058F	4196F	5050F
0581F	1181F	3049F	3285F	3513F	4060F	4200F	5060F
0582F	1182F	3050F	3288F	3514F	4062F	4201F	5062F
0583F	1183F	3055F	3290F	3515F	4063F	4210F	5100F
0584F	1200F	3056F	3291F	3517F	4064F	4220F	5200F
1000F	1205F	3060F	3292F	3520F	4065F	4221F	5250F
1002F	1220F	3061F	3293F	3550F	4066F	4230F	6005F
1003F	1400F	3062F	3294F	3551F	4067F	4240F	6010F

1004F	1450F	3066F	3300F	3552F	4069F	4242F	6015F
1005F	1451F	3072F	3301F	3555F	4070F	4245F	6020F
1006F	1460F	3073F	3315F	3570F	4073F	4248F	6030F
1007F	1461F	3074F	3316F	3572F	4075F	4250F	6040F
1008F	1490F	3075F	3317F	3573F	4077F	4255F	6045F
1010F	1491F	3077F	3318F	3650F	4079F	4256F	6070F
1011F	1493F	3078F	3319F	3700F	4084F	4260F	6080F
1012F	1494F	3079F	3320F	3720F	4086F	4261F	6090F
1015F	1500F	3080F	3321F	3725F	4090F	4265F	6100F
1018F	1501F	3082F	3322F	3750F	4095F	4266F	6101F
1019F	1502F	3083F	3323F	3751F	4100F	4267F	6102F
1022F	1503F	3084F	3324F	3752F	4110F	4268F	6110F
1026F	1504F	3085F	3325F	3753F	4115F	4269F	6150F
1030F	1505F	3088F	3328F	3754F	4120F	4270F	7010F
1031F	2000F	3089F	3330F	3755F	4124F	4271F	7020F
1032F	2001F	3090F	3331F	3756F	4130F	4274F	7025F
1033F	2002F	3091F	3340F	3757F	4131F	4276F	9001F
1034F	2004F	3092F	3341F	3758F	4132F	4279F	9002F
1035F	2010F	3093F	3342F	3759F	4133F	4280F	9003F
1036F	2014F	3095F	3343F	3760F	4134F	4290F	9004F
1038F	2015F	3096F	3344F	3761F	4135F	4293F	9005F
1039F	2016F	3100F	3345F	3762F	4136F	4300F	9006F
1040F	2018F	3110F	3350F	3763F	4140F	4301F	9007F
1050F	2019F	3111F	3351F	3775F	4142F	4305F	
1052F	2020F	3112F	3352F	3776F	4144F	4306F	
1055F	2021F	3115F	3353F	4000F	4145F	4320F	
1060F	2022F	3117F	3354F	4001F	4148F	4322F	
1061F	2024F	3118F	3370F	4003F	4149F	4324F	
1065F	2026F	3119F	3372F	4004F	4150F	4325F	
1066F	2027F	3120F	3374F	4005F	4151F	4326F	

APPENDIX – B ICD-10 CM CODES (O00- O9A)

O00.00 O00.01	O00.1	O00.201 O00.202 O00.209	O00.80 O00.81	O00.90 O00.91	O01.0	O01.1	O01.9
O02.0	O02.1	O02.81	O02.89	O02.9	O03.0	O03.1	O03.2
O03.30	O03.31	O03.32	O03.33	O03.34	O03.35	O03.36	O03.37
O03.38	O03.39	O03.4	O03.5	O03.6	O03.7	O03.80	O03.81
O03.82	O03.83	O03.84	O03.85	O03.86	O03.87	O03.88	O03.89
O03.9	O04.5	O04.6	O04.7	O04.80	O04.81	O04.82	O04.83
O04.84	O04.85	O04.86	O04.87	O04.88	O04.89	O07.0	O07.1
O07.2	O07.30	O07.31	O07.32	O07.33	O07.34	O07.35	O07.36
O07.37	O07.38	O07.39	O07.4	O08.0	O08.1	O08.2	O08.3
O08.4	O08.5	O08.6	O08.7	O08.81	O08.82	O08.83	O08.89
O08.9	O09.00	O09.01	O09.02	O09.03	O09.10	O09.11	O09.12
O09.13	O09.211	O09.212	O09.213	O09.219	O09.291	O09.292	O09.293
O09.299	O09.30	O09.31	O09.32	O09.33	O09.40	O09.41	O09.42
O09.43	O09.511	O09.512	O09.513	O09.519	O09.521	O09.522	O09.523
O09.529	O09.611	O09.612	O09.613	O09.619	O09.621	O09.622	O09.623
O09.629	O09.70	O09.71	O09.72	O09.73	O09.811	O09.812	O09.813
O09.819	O09.821	O09.822	O09.823	O09.829	O09.891	O09.892	O09.893
O09.899	O09.90	O09.91	O09.92	O09.93	O10.011	O10.012	O10.013
O10.019	O10.02	O10.03	O10.111	O10.112	O10.113	O10.119	O10.12
O10.13	O10.211	O10.212	O10.213	O10.219	O10.22	O10.23	O10.311
O10.312	O10.313	O10.319	O10.32	O10.33	O10.411	O10.412	O10.413
O10.419	O10.42	O10.43	O10.911	O10.912	O10.913	O10.919	O10.92
O10.93	O11.1	O11.2	O11.3	O11.9	O12.00	O12.01	O12.02
O12.03	O12.10	O12.11	O12.12	O12.13	O12.20	O12.21	O12.22
O12.23	O13.1	O13.2	O13.3	O13.9	O14.00	O14.02	O14.03
O14.10	O14.12	O14.13	O14.20	O14.22	O14.23	O14.90	O14.92
O14.93	O15.00	O15.02	O15.03	O15.1	O15.2	O15.9	O16.1
O16.2	O16.3	O16.9	O20.0	O20.8	O20.9	O21.0	O21.1
O21.2	O21.8	O21.9	O22.00	O22.01	O22.02	O22.03	O22.10
O22.11	O22.12	O22.13	O22.20	O22.21	O22.22	O22.23	O22.30
O22.31	O22.32	O22.33	O22.40	O22.41	O22.42	O22.43	O22.50
O22.51	O22.52	O22.53	O22.8X1	O22.8X2	O22.8X3	O22.8X9	O22.90
O22.91	O22.92	O22.93	O23.00	O23.01	O23.02	O23.03	O23.10
O23.11	O23.12	O23.13	O23.20	O23.21	O23.22	O23.23	O23.30
O23.31	O23.32	O23.33	O23.40	O23.41	O23.42	O23.43	O23.511
O23.512	O23.513	O23.519	O23.521	O23.522	O23.523	O23.529	O23.591
O23.592	O23.593	O23.599	O23.90	O23.91	O23.92	O23.93	O24.011
O24.012	O24.013	O24.019	O24.02	O24.03	O24.111	O24.112	O24.113
O24.119	O24.12	O24.13	O24.311	O24.312	O24.313	O24.319	O24.32

O24.33	O24.410	O24.414	O24.419	O24.420	O24.424	O24.429	O24.430
O24.434	O24.439	O24.811	O24.812	O24.813	O24.819	O24.82	O24.83
O24.911	O24.912	O24.913	O24.919	O24.92	O24.93	O25.10	O25.11
O25.12	O25.13	O25.2	O25.3	O26.00	O26.01	O26.02	O26.03
O26.10	O26.11	O26.12	O26.13	O26.20	O26.21	O26.22	O26.23
O26.30	O26.31	O26.32	O26.33	O26.40	O26.41	O26.42	O26.43
O26.50	O26.51	O26.52	O26.53	O26.611	O26.612	O26.613	O26.619
O26.62	O26.63	O26.711	O26.712	O26.713	O26.719	O26.72	O26.73
O26.811	O26.812	O26.813	O26.819	O26.821	O26.822	O26.823	O26.829
O26.831	O26.832	O26.833	O26.839	O26.841	O26.842	O26.843	O26.849
O26.851	O26.852	O26.853	O26.859	O26.86	O26.872	O26.873	O26.879
O26.891	O26.892	O26.893	O26.899	O26.90	O26.91	O26.92	O26.93
O28.0	O28.1	O28.2	O28.3	O28.4	O28.5	O28.8	O28.9
O29.011	O29.012	O29.013	O29.019	O29.021	O29.022	O29.023	O29.029
O29.091	O29.092	O29.093	O29.099	O29.111	O29.112	O29.113	O29.119
O29.121	O29.122	O29.123	O29.129	O29.191	O29.192	O29.193	O29.199
O29.211	O29.212	O29.213	O29.219	O29.291	O29.292	O29.293	O29.299
O29.3X1	O29.3X2	O29.3X3	O29.3X9	O29.40	O29.41	O29.42	O29.43
O29.5X1	O29.5X2	O29.5X3	O29.5X9	O29.60	O29.61	O29.62	O29.63
O29.8X1	O29.8X2	O29.8X3	O29.8X9	O29.90	O29.91	O29.92	O29.93
O30.001	O30.002	O30.003	O30.009	O30.011	O30.012	O30.013	O30.019
O30.021	O30.022	O30.023	O30.029	O30.031	O30.032	O30.033	O30.039
O30.041	O30.042	O30.043	O30.049	O30.091	O30.092	O30.093	O30.099
O30.101	O30.102	O30.103	O30.109	O30.111	O30.112	O30.113	O30.119
O30.121	O30.122	O30.123	O30.129	O30.191	O30.192	O30.193	O30.199
O30.201	O30.202	O30.203	O30.209	O30.211	O30.212	O30.213	O30.219
O30.221	O30.222	O30.223	O30.229	O30.291	O30.292	O30.293	O30.299
O30.801	O30.802	O30.803	O30.809	O30.811	O30.812	O30.813	O30.819
O30.821	O30.822	O30.823	O30.829	O30.891	O30.892	O30.893	O30.899
O30.90	O30.91	O30.92	O30.93	O31.00X0	O31.00X1	O31.00X2	O31.00X3
O31.00X4	O31.00X5	O31.00X9	O31.01X0	O31.01X1	O31.01X2	O31.01X3	O31.01X4
O31.01X5	O31.01X9	O31.02X0	O31.02X1	O31.02X2	O31.02X3	O31.02X4	O31.02X5
O31.02X9	O31.03X0	O31.03X1	O31.03X2	O31.03X3	O31.03X4	O31.03X5	O31.03X9
O31.10X0	O31.10X1	O31.10X2	O31.10X3	O31.10X4	O31.10X5	O31.10X9	O31.11X0
O31.11X1	O31.11X2	O31.11X3	O31.11X4	O31.11X5	O31.11X9	O31.12X0	O31.12X1
O31.12X2	O31.12X3	O31.12X4	O31.12X5	O31.12X9	O31.13X0	O31.13X1	O31.13X2
O31.13X3	O31.13X4	O31.13X5	O31.13X9	O31.20X0	O31.20X1	O31.20X2	O31.20X3
O31.20X4	O31.20X5	O31.20X9	O31.21X0	O31.21X1	O31.21X2	O31.21X3	O31.21X4
O31.21X5	O31.21X9	O31.22X0	O31.22X1	O31.22X2	O31.22X3	O31.22X4	O31.22X5
O31.22X9	O31.23X0	O31.23X1	O31.23X2	O31.23X3	O31.23X4	O31.23X5	O31.23X9
O31.30X0	O31.30X1	O31.30X2	O31.30X3	O31.30X4	O31.30X5	O31.30X9	O31.31X0
O31.31X1	O31.31X2	O31.31X3	O31.31X4	O31.31X5	O31.31X9	O31.32X0	O31.32X1

O31.32X2	O31.32X3	O31.32X4	O31.32X5	O31.32X9	O31.33X0	O31.33X1	O31.33X2
O31.33X3	O31.33X4	O31.33X5	O31.33X9	O31.8X10	O31.8X11	O31.8X12	O31.8X13
O31.8X14	O31.8X15	O31.8X19	O31.8X20	O31.8X21	O31.8X22	O31.8X23	O31.8X24
O31.8X25	O31.8X29	O31.8X30	O31.8X31	O31.8X32	O31.8X33	O31.8X34	O31.8X35
O31.8X39	O31.8X90	O31.8X91	O31.8X92	O31.8X93	O31.8X94	O31.8X95	O31.8X99
O32.0XX0	O32.0XX1	O32.0XX2	O32.0XX3	O32.0XX4	O32.0XX5	O32.0XX9	O32.1XX0
O24.434	O24.439	O24.811	O24.812	O24.813	O24.819	O24.82	O24.83
O24.911	O24.912	O24.913	O24.919	O24.92	O24.93	O25.10	O25.11
O25.12	O25.13	O25.2	O25.3	O26.00	O26.01	O26.02	O26.03
O26.10	O26.11	O26.12	O26.13	O26.20	O26.21	O26.22	O26.23
O26.30	O26.31	O26.32	O26.33	O26.40	O26.41	O26.42	O26.43
O26.50	O26.51	O26.52	O26.53	O26.611	O26.612	O26.613	O26.619
O26.62	O26.63	O26.711	O26.712	O26.713	O26.719	O26.72	O26.73
O26.811	O26.812	O26.813	O26.819	O26.821	O26.822	O26.823	O26.829
O26.831	O26.832	O26.833	O26.839	O26.841	O26.842	O26.843	O26.849
O26.851	O26.852	O26.853	O26.859	O26.86	O26.872	O26.873	O26.879
O26.891	O26.892	O26.893	O26.899	O26.90	O26.91	O26.92	O26.93
O28.0	O28.1	O28.2	O28.3	O28.4	O28.5	O28.8	O28.9
O29.011	O29.012	O29.013	O29.019	O29.021	O29.022	O29.023	O29.029
O29.091	O29.092	O29.093	O29.099	O29.111	O29.112	O29.113	O29.119
O29.121	O29.122	O29.123	O29.129	O29.191	O29.192	O29.193	O29.199
O29.211	O29.212	O29.213	O29.219	O29.291	O29.292	O29.293	O29.299
O29.3X1	O29.3X2	O29.3X3	O29.3X9	O29.40	O29.41	O29.42	O29.43
O29.5X1	O29.5X2	O29.5X3	O29.5X9	O29.60	O29.61	O29.62	O29.63
O29.8X1	O29.8X2	O29.8X3	O29.8X9	O29.90	O29.91	O29.92	O29.93
O30.001	O30.002	O30.003	O30.009	O30.011	O30.012	O30.013	O30.019
O30.021	O30.022	O30.023	O30.029	O30.031	O30.032	O30.033	O30.039
O30.041	O30.042	O30.043	O30.049	O30.091	O30.092	O30.093	O30.099
O30.101	O30.102	O30.103	O30.109	O30.111	O30.112	O30.113	O30.119
O30.121	O30.122	O30.123	O30.129	O30.191	O30.192	O30.193	O30.199
O30.201	O30.202	O30.203	O30.209	O30.211	O30.212	O30.213	O30.219
O30.221	O30.222	O30.223	O30.229	O30.291	O30.292	O30.293	O30.299
O30.801	O30.802	O30.803	O30.809	O30.811	O30.812	O30.813	O30.819
O30.821	O30.822	O30.823	O30.829	O30.891	O30.892	O30.893	O30.899
O30.90	O30.91	O30.92	O30.93	O31.00X0	O31.00X1	O31.00X2	O31.00X3
O31.00X4	O31.00X5	O31.00X9	O31.01X0	O31.01X1	O31.01X2	O31.01X3	O31.01X4
O31.01X5	O31.01X9	O31.02X0	O31.02X1	O31.02X2	O31.02X3	O31.02X4	O31.02X5
O31.02X9	O31.03X0	O31.03X1	O31.03X2	O31.03X3	O31.03X4	O31.03X5	O31.03X9
O31.10X0	O31.10X1	O31.10X2	O31.10X3	O31.10X4	O31.10X5	O31.10X9	O31.11X0
O31.11X1	O31.11X2	O31.11X3	O31.11X4	O31.11X5	O31.11X9	O31.12X0	O31.12X1
O31.12X2	O31.12X3	O31.12X4	O31.12X5	O31.12X9	O31.13X0	O31.13X1	O31.13X2
O31.13X3	O31.13X4	O31.13X5	O31.13X9	O31.20X0	O31.20X1	O31.20X2	O31.20X3

O31.20X4	O31.20X5	O31.20X9	O31.21X0	O31.21X1	O31.21X2	O31.21X3	O31.21X4
O31.21X5	O31.21X9	O31.22X0	O31.22X1	O31.22X2	O31.22X3	O31.22X4	O31.22X5
O31.22X9	O31.23X0	O31.23X1	O31.23X2	O31.23X3	O31.23X4	O31.23X5	O31.23X9
O31.30X0	O31.30X1	O31.30X2	O31.30X3	O31.30X4	O31.30X5	O31.30X9	O31.31X0
O31.31X1	O31.31X2	O31.31X3	O31.31X4	O31.31X5	O31.31X9	O31.32X0	O31.32X1
O31.32X2	O31.32X3	O31.32X4	O31.32X5	O31.32X9	O31.33X0	O31.33X1	O31.33X2
O31.33X3	O31.33X4	O31.33X5	O31.33X9	O31.8X10	O31.8X11	O31.8X12	O31.8X13
O31.8X14	O31.8X15	O31.8X19	O31.8X20	O31.8X21	O31.8X22	O31.8X23	O31.8X24
O31.8X25	O31.8X29	O31.8X30	O31.8X31	O31.8X32	O31.8X33	O31.8X34	O31.8X35
O31.8X39	O31.8X90	O31.8X91	O31.8X92	O31.8X93	O31.8X94	O31.8X95	O31.8X99
O32.0XX0	O32.0XX1	O32.0XX2	O32.0XX3	O32.0XX4	O32.0XX5	O32.0XX9	O32.1XX0
O32.1XX1	O32.1XX2	O32.1XX3	O32.1XX4	O32.1XX5	O32.1XX9	O32.2XX0	O32.2XX1
O32.2XX2	O32.2XX3	O32.2XX4	O32.2XX5	O32.2XX9	O32.3XX0	O32.3XX1	O32.3XX2
O32.3XX3	O32.3XX4	O32.3XX5	O32.3XX9	O32.4XX0	O32.4XX1	O32.4XX2	O32.4XX3
O32.4XX4	O32.4XX5	O32.4XX9	O32.6XX0	O32.6XX1	O32.6XX2	O32.6XX3	O32.6XX4
O32.6XX5	O32.6XX9	O32.8XX0	O32.8XX1	O32.8XX2	O32.8XX3	O32.8XX4	O32.8XX5
O32.8XX9	O32.9XX0	O32.9XX1	O32.9XX2	O32.9XX3	O32.9XX4	O32.9XX5	O32.9XX9
O33.0	O33.1	O33.2	O33.3XX0	O33.3XX1	O33.3XX2	O33.3XX3	O33.3XX4
O33.3XX5	O33.3XX9	O33.4XX0	O33.4XX1	O33.4XX2	O33.4XX3	O33.4XX4	O33.4XX5
O33.4XX9	O33.5XX0	O33.5XX1	O33.5XX2	O33.5XX3	O33.5XX4	O33.5XX5	O33.5XX9
O33.6XX0	O33.6XX1	O33.6XX2	O33.6XX3	O33.6XX4	O33.6XX5	O33.6XX9	O33.7XX0 O33.7XX1 O33.7XX2 O33.7XX3 O33.7XX4 O33.7XX5 O33.7XX9
O33.8	O33.9	O34.00	O34.01	O34.02	O34.03	O34.10	O34.11
O34.12	O34.13	O34.211 O34.212 O34.219	O34.29	O34.30	O34.31	O34.32	O34.33
O34.40	O34.41	O34.42	O34.43	O34.511	O34.512	O34.513	O34.519
O34.521	O34.522	O34.523	O34.529	O34.531	O34.532	O34.533	O34.539
O34.591	O34.592	O34.593	O34.599	O34.60	O34.61	O34.62	O34.63
O34.70	O34.71	O34.72	O34.73	O34.80	O34.81	O34.82	O34.83
O34.90	O34.91	O34.92	O34.93	O35.0XX0	O35.0XX1	O35.0XX2	O35.0XX3
O35.0XX4	O35.0XX5	O35.0XX9	O35.1XX0	O35.1XX1	O35.1XX2	O35.1XX3	O35.1XX4
O35.1XX5	O35.1XX9	O35.2XX0	O35.2XX1	O35.2XX2	O35.2XX3	O35.2XX4	O35.2XX5
O35.2XX9	O35.3XX0	O35.3XX1	O35.3XX2	O35.3XX3	O35.3XX4	O35.3XX5	O35.3XX9
O35.4XX0	O35.4XX1	O35.4XX2	O35.4XX3	O35.4XX4	O35.4XX5	O35.4XX9	O35.5XX0
O35.5XX1	O35.5XX2	O35.5XX3	O35.5XX4	O35.5XX5	O35.5XX9	O35.6XX0	O35.6XX1
O35.6XX2	O35.6XX3	O35.6XX4	O35.6XX5	O35.6XX9	O35.7XX0	O35.7XX1	O35.7XX2
O35.7XX3	O35.7XX4	O35.7XX5	O35.7XX9	O35.8XX0	O35.8XX1	O35.8XX2	O35.8XX3

O35.8XX4	O35.8XX5	O35.8XX9	O35.9XX0	O35.9XX1	O35.9XX2	O35.9XX3	O35.9XX4
O35.9XX5	O35.9XX9	O36.0110	O36.0111	O36.0112	O36.0113	O36.0114	O36.0115
O36.0119	O36.0120	O36.0121	O36.0122	O36.0123	O36.0124	O36.0125	O36.0129
O36.0130	O36.0131	O36.0132	O36.0133	O36.0134	O36.0135	O36.0139	O36.0190
O36.0191	O36.0192	O36.0193	O36.0194	O36.0195	O36.0199	O36.0910	O36.0911
O36.0912	O36.0913	O36.0914	O36.0915	O36.0919	O36.0920	O36.0921	O36.0922
O36.0923	O36.0924	O36.0925	O36.0929	O36.0930	O36.0931	O36.0932	O36.0933
O36.0934	O36.0935	O36.0939	O36.0990	O36.0991	O36.0992	O36.0993	O36.0994
O36.0995	O36.0999	O36.1110	O36.1111	O36.1112	O36.1113	O36.1114	O36.1115
O36.1119	O36.1120	O36.1121	O36.1122	O36.1123	O36.1124	O36.1125	O36.1129
O36.1130	O36.1131	O36.1132	O36.1133	O36.1134	O36.1135	O36.1139	O36.1190
O36.1191	O36.1192	O36.1193	O36.1194	O36.1195	O36.1199	O36.1910	O36.1911
O36.1912	O36.1913	O36.1914	O36.1915	O36.1919	O36.1920	O36.1921	O36.1922
O36.1923	O36.1924	O36.1925	O36.1929	O36.1930	O36.1931	O36.1932	O36.1933
O36.1934	O36.1935	O36.1939	O36.1990	O36.1991	O36.1992	O36.1993	O36.1994
O36.1995	O36.1999	O36.20X0	O36.20X1	O36.20X2	O36.20X3	O36.20X4	O36.20X5
O36.20X9	O36.21X0	O36.21X1	O36.21X2	O36.21X3	O36.21X4	O36.21X5	O36.21X9
O36.22X0	O36.22X1	O36.22X2	O36.22X3	O36.22X4	O36.22X5	O36.22X9	O36.23X0
O36.23X1	O36.23X2	O36.23X3	O36.23X4	O36.23X5	O36.23X9	O36.4XX0	O36.4XX1
O36.4XX2	O36.4XX3	O36.4XX4	O36.4XX5	O36.4XX9	O36.5110	O36.5111	O36.5112
O36.5113	O36.5114	O36.5115	O36.5119	O36.5120	O36.5121	O36.5122	O36.5123
O36.5124	O36.5125	O36.5129	O36.5130	O36.5131	O36.5132	O36.5133	O36.5134
O36.5135	O36.5139	O36.5190	O36.5191	O36.5192	O36.5193	O36.5194	O36.5195
O36.5199	O36.5910	O36.5911	O36.5912	O36.5913	O36.5914	O36.5915	O36.5919
O36.5920	O36.5921	O36.5922	O36.5923	O36.5924	O36.5925	O36.5929	O36.5930
O36.5931	O36.5932	O36.5933	O36.5934	O36.5935	O36.5939	O36.5990	O36.5991
O36.5992	O36.5993	O36.5994	O36.5995	O36.5999	O36.60X0	O36.60X1	O36.60X2
O36.60X3	O36.60X4	O36.60X5	O36.60X9	O36.61X0	O36.61X1	O36.61X2	O36.61X3
O36.61X4	O36.61X5	O36.61X9	O36.62X0	O36.62X1	O36.62X2	O36.62X3	O36.62X4
O36.62X5	O36.62X9	O36.63X0	O36.63X1	O36.63X2	O36.63X3	O36.63X4	O36.63X5
O36.63X9	O36.70X0	O36.70X1	O36.70X2	O36.70X3	O36.70X4	O36.70X5	O36.70X9
O36.71X0	O36.71X1	O36.71X2	O36.71X3	O36.71X4	O36.71X5	O36.71X9	O36.72X0
O36.72X1	O36.72X2	O36.72X3	O36.72X4	O36.72X5	O36.72X9	O36.73X0	O36.73X1
O36.73X2	O36.73X3	O36.73X4	O36.73X5	O36.73X9	O36.80X0	O36.80X1	O36.80X2
O36.80X3	O36.80X4	O36.80X5	O36.80X9	O36.8120	O36.8121	O36.8122	O36.8123
O36.8124	O36.8125	O36.8129	O36.8130	O36.8131	O36.8132	O36.8133	O36.8134
O36.8135	O36.8139	O36.8190	O36.8191	O36.8192	O36.8193	O36.8194	O36.8195
O36.8199	O36.8210	O36.8211	O36.8212	O36.8213	O36.8214	O36.8215	O36.8219
O36.8220	O36.8221	O36.8222	O36.8223	O36.8224	O36.8225	O36.8229	O36.8230
O36.8231	O36.8232	O36.8233	O36.8234	O36.8235	O36.8239	O36.8290	O36.8291
O36.8292	O36.8293	O36.8294	O36.8295	O36.8299	O36.8910	O36.8911	O36.8912
O36.8913	O36.8914	O36.8915	O36.8919	O36.8920	O36.8921	O36.8922	O36.8923

O36.8924	O36.8925	O36.8929	O36.8930	O36.8931	O36.8932	O36.8933	O36.8934
O36.8935	O36.8939	O36.8990	O36.8991	O36.8992	O36.8993	O36.8994	O36.8995
O36.8999	O36.90X0	O36.90X1	O36.90X2	O36.90X3	O36.90X4	O36.90X5	O36.90X9
O36.91X0	O36.91X1	O36.91X2	O36.91X3	O36.91X4	O36.91X5	O36.91X9	O36.92X0
O36.92X1	O36.92X2	O36.92X3	O36.92X4	O36.92X5	O36.92X9	O36.93X0	O36.93X1
O36.93X2	O36.93X3	O36.93X4	O36.93X5	O36.93X9	O40.1XX0	O40.1XX1	O40.1XX2
O40.1XX3	O40.1XX4	O40.1XX5	O40.1XX9	O40.2XX0	O40.2XX1	O40.2XX2	O40.2XX3
O40.2XX4	O40.2XX5	O40.2XX9	O40.3XX0	O40.3XX1	O40.3XX2	O40.3XX3	O40.3XX4
O40.3XX5	O40.3XX9	O40.9XX0	O40.9XX1	O40.9XX2	O40.9XX3	O40.9XX4	O40.9XX5
O40.9XX9	O41.00X0	O41.00X1	O41.00X2	O41.00X3	O41.00X4	O41.00X5	O41.00X9
O41.01X0	O41.01X1	O41.01X2	O41.01X3	O41.01X4	O41.01X5	O41.01X9	O41.02X0
O41.02X1	O41.02X2	O41.02X3	O41.02X4	O41.02X5	O41.02X9	O41.03X0	O41.03X1
O41.03X2	O41.03X3	O41.03X4	O41.03X5	O41.03X9	O41.1010	O41.1011	O41.1012
O41.1013	O41.1014	O41.1015	O41.1019	O41.1020	O41.1021	O41.1022	O41.1023
O41.1024	O41.1025	O41.1029	O41.1030	O41.1031	O41.1032	O41.1033	O41.1034
O41.1035	O41.1039	O41.1090	O41.1091	O41.1092	O41.1093	O41.1094	O41.1095
O41.1099	O41.1210	O41.1211	O41.1212	O41.1213	O41.1214	O41.1215	O41.1219
O41.1220	O41.1221	O41.1222	O41.1223	O41.1224	O41.1225	O41.1229	O41.1230
O41.1231	O41.1232	O41.1233	O41.1234	O41.1235	O41.1239	O41.1290	O41.1291
O41.1292	O41.1293	O41.1294	O41.1295	O41.1299	O41.1410	O41.1411	O41.1412
O41.1413	O41.1414	O41.1415	O41.1419	O41.1420	O41.1421	O41.1422	O41.1423
O41.1424	O41.1425	O41.1429	O41.1430	O41.1431	O41.1432	O41.1433	O41.1434
O41.1435	O41.1439	O41.1490	O41.1491	O41.1492	O41.1493	O41.1494	O41.1495
O41.1499	O41.8X10	O41.8X11	O41.8X12	O41.8X13	O41.8X14	O41.8X15	O41.8X19
O41.8X20	O41.8X21	O41.8X22	O41.8X23	O41.8X24	O41.8X25	O41.8X29	O41.8X30
O41.8X31	O41.8X32	O41.8X33	O41.8X34	O41.8X35	O41.8X39	O41.8X90	O41.8X91
O41.8X92	O41.8X93	O41.8X94	O41.8X95	O41.8X99	O41.90X0	O41.90X1	O41.90X2
O41.90X3	O41.90X4	O41.90X5	O41.90X9	O41.91X0	O41.91X1	O41.91X2	O41.91X3
O41.91X4	O41.91X5	O41.91X9	O41.92X0	O41.92X1	O41.92X2	O41.92X3	O41.92X4
O41.92X5	O41.92X9	O41.93X0	O41.93X1	O41.93X2	O41.93X3	O41.93X4	O41.93X5
O41.93X9	O42.00	O42.011	O42.012	O42.013	O42.019	O42.02	O42.10
O42.111	O42.112	O42.113	O42.119	O42.12	O42.90	O42.911	O42.912
O42.913	O42.919	O42.92	O43.011	O43.012	O43.013	O43.019	O43.021
O43.022	O43.023	O43.029	O43.101	O43.102	O43.103	O43.109	O43.111
O43.112	O43.113	O43.119	O43.121	O43.122	O43.123	O43.129	O43.191
O43.192	O43.193	O43.199	O43.211	O43.212	O43.213	O43.219	O43.221
O43.222	O43.223	O43.229	O43.231	O43.232	O43.233	O43.239	O43.811
O43.812	O43.813	O43.819	O43.891	O43.892	O43.893	O43.899	O43.90
O43.91	O43.92	O43.93	O44.00	O44.01	O44.02	O44.03	O44.10
O44.11	O44.12	O44.13	O45.001	O45.002	O45.003	O45.009	O45.011
O45.012	O45.013	O45.019	O45.021	O45.022	O45.023	O45.029	O45.091
O45.092	O45.093	O45.099	O45.8X1	O45.8X2	O45.8X3	O45.8X9	O45.90

O45.91	O45.92	O45.93	O46.001	O46.002	O46.003	O46.009	O46.011
O46.012	O46.013	O46.019	O46.021	O46.022	O46.023	O46.029	O46.091
O46.092	O46.093	O46.099	O46.8X1	O46.8X2	O46.8X3	O46.8X9	O46.90
O46.91	O46.92	O46.93	O47.00	O47.02	O47.03	O47.1	O47.9
O48.0	O48.1	O60.00	O60.02	O60.03	O60.10X0	O60.10X1	O60.10X2
O60.10X3	O60.10X4	O60.10X5	O60.10X9	O60.12X0	O60.12X1	O60.12X2	O60.12X3
O60.12X4	O60.12X5	O60.12X9	O60.13X0	O60.13X1	O60.13X2	O60.13X3	O60.13X4
O60.13X5	O60.13X9	O60.14X0	O60.14X1	O60.14X2	O60.14X3	O60.14X4	O60.14X5
O60.14X9	O60.20X0	O60.20X1	O60.20X2	O60.20X3	O60.20X4	O60.20X5	O60.20X9
O60.22X0	O60.22X1	O60.22X2	O60.22X3	O60.22X4	O60.22X5	O60.22X9	O60.23X0
O60.23X1	O60.23X2	O60.23X3	O60.23X4	O60.23X5	O60.23X9	O61.0	O61.1
O61.8	O61.9	O62.0	O62.1	O62.2	O62.3	O62.4	O62.8
O62.9	O63.0	O63.1	O63.2	O63.9	O64.0XX0	O64.0XX1	O64.0XX2
O64.0XX3	O64.0XX4	O64.0XX5	O64.0XX9	O64.1XX0	O64.1XX1	O64.1XX2	O64.1XX3
O64.1XX4	O64.1XX5	O64.1XX9	O64.2XX0	O64.2XX1	O64.2XX2	O64.2XX3	O64.2XX4
O64.2XX5	O64.2XX9	O64.3XX0	O64.3XX1	O64.3XX2	O64.3XX3	O64.3XX4	O64.3XX5
O64.3XX9	O64.4XX0	O64.4XX1	O64.4XX2	O64.4XX3	O64.4XX4	O64.4XX5	O64.4XX9
O64.5XX0	O64.5XX1	O64.5XX2	O64.5XX3	O64.5XX4	O64.5XX5	O64.5XX9	O64.8XX0
O64.8XX1	O64.8XX2	O64.8XX3	O64.8XX4	O64.8XX5	O64.8XX9	O64.9XX0	O64.9XX1
O64.9XX2	O64.9XX3	O64.9XX4	O64.9XX5	O64.9XX9	O65.0	O65.1	O65.2
O65.3	O65.4	O65.5	O65.8	O65.9	O66.0	O66.1	O66.2
O66.3	O66.40	O66.41	O66.5	O66.6	O66.8	O66.9	O67.0
O67.8	O67.9	O68	O69.0XX0	O69.0XX1	O69.0XX2	O69.0XX3	O69.0XX4
O69.0XX5	O69.0XX9	O69.1XX0	O69.1XX1	O69.1XX2	O69.1XX3	O69.1XX4	O69.1XX5
O69.1XX9	O69.2XX0	O69.2XX1	O69.2XX2	O69.2XX3	O69.2XX4	O69.2XX5	O69.2XX9
O69.3XX0	O69.3XX1	O69.3XX2	O69.3XX3	O69.3XX4	O69.3XX5	O69.3XX9	O69.4XX0
O69.4XX1	O69.4XX2	O69.4XX3	O69.4XX4	O69.4XX5	O69.4XX9	O69.5XX0	O69.5XX1
O69.5XX2	O69.5XX3	O69.5XX4	O69.5XX5	O69.5XX9	O69.81X0	O69.81X1	O69.81X2
O69.81X3	O69.81X4	O69.81X5	O69.81X9	O69.82X0	O69.82X1	O69.82X2	O69.82X3
O69.82X4	O69.82X5	O69.82X9	O69.89X0	O69.89X1	O69.89X2	O69.89X3	O69.89X4
O69.89X5	O69.89X9	O69.9XX0	O69.9XX1	O69.9XX2	O69.9XX3	O69.9XX4	O69.9XX5
O69.9XX9	O70.0	O70.1	O70.20	O70.21	O70.22	O70.23	O70.3
O71.02	O71.03	O71.1	O71.2	O71.3	O71.4	O71.5	O71.6
O71.7	O71.81	O71.82	O71.89	O71.9	O72.0	O72.1	O72.2
O72.3	O73.0	O73.1	O74.0	O74.1	O74.2	O74.3	O74.4
O74.5	O74.6	O74.7	O74.8	O74.9	O75.0	O75.1	O75.2
O75.3	O75.4	O75.5	O75.81	O75.82	O75.89	O75.9	O76
O77.0	O77.1	O77.8	O77.9	O80	O82	O85	O86.0
O86.11	O86.12	O86.13	O86.19	O86.20	O86.21	O86.22	O86.29
O86.4	O86.81	O86.89	O87.0	O87.1	O87.2	O87.3	O87.4
O87.8	O87.9	O88.011	O88.012	O88.013	O88.019	O88.02	O88.03
O88.111	O88.112	O88.113	O88.119	O88.12	O88.13	O88.211	O88.212

O88.213	O88.219	O88.22	O88.23	O88.311	O88.312	O88.313	O88.319
O88.32	O88.33	O88.811	O88.812	O88.813	O88.819	O88.82	O88.83
O89.01	O89.09	O89.1	O89.2	O89.3	O89.4	O89.5	O89.6
O89.8	O89.9	O90.0	O90.1	O90.2	O90.3	O90.4	O90.5
O90.6	O90.81	O90.89	O90.9	O91.011	O91.012	O91.013	O91.019
O91.02	O91.03	O91.111	O91.112	O91.113	O91.119	O91.12	O91.13
O91.211	O91.212	O91.213	O91.219	O91.22	O91.23	O92.011	O92.012
O92.013	O92.019	O92.02	O92.03	O92.111	O92.112	O92.113	O92.119
O92.12	O92.13	O92.20	O92.29	O92.3	O92.4	O92.5	O92.6
O92.70	O92.79	O94	O98.011	O98.012	O98.013	O98.019	O98.02
O98.03	O98.111	O98.112	O98.113	O98.119	O98.12	O98.13	O98.211
O98.212	O98.213	O98.219	O98.22	O98.23	O98.311	O98.312	O98.313
O98.319	O98.32	O98.33	O98.411	O98.412	O98.413	O98.419	O98.42
O98.43	O98.511	O98.512	O98.513	O98.519	O98.52	O98.53	O98.611
O98.612	O98.613	O98.619	O98.62	O98.63	O98.711	O98.712	O98.713
O98.719	O98.72	O98.73	O98.811	O98.812	O98.813	O98.819	O98.82
O98.83	O98.911	O98.912	O98.913	O98.919	O98.92	O98.93	O99.011
O99.012	O99.013	O99.019	O99.02	O99.03	O99.111	O99.112	O99.113
O99.119	O99.12	O99.13	O99.210	O99.211	O99.212	O99.213	O99.214
O99.215	O99.280	O99.281	O99.282	O99.283	O99.284	O99.285	O99.310
O99.311	O99.312	O99.313	O99.314	O99.315	O99.320	O99.321	O99.322
O99.323	O99.324	O99.325	O99.330	O99.331	O99.332	O99.333	O99.334
O99.335	O99.340	O99.341	O99.342	O99.343	O99.344	O99.345	O99.350
O99.351	O99.352	O99.353	O99.354	O99.355	O99.411	O99.412	O99.413
O99.419	O99.42	O99.43	O99.511	O99.512	O99.513	O99.519	O99.52
O99.53	O99.611	O99.612	O99.613	O99.619	O99.62	O99.63	O99.711
O99.712	O99.713	O99.719	O99.72	O99.73	O99.810	O99.814	O99.815
O99.820	O99.824	O99.825	O99.830	O99.834	O99.835	O99.840	O99.841
O99.842	O99.843	O99.844	O99.845	O99.89	O9A.111	O9A.112	O9A.113
O9A.119	O9A.12	O9A.13	O9A.211	O9A.212	O9A.213	O9A.219	O9A.22
O9A.23	O9A.311	O9A.312	O9A.313	O9A.319	O9A.32	O9A.33	O9A.411
O9A.412	O9A.413	O9A.419	O9A.42	O9A.43	O9A.511	O9A.512	O9A.513
O9A.519	O9A.52	O9A.53	O70.4	O70.9	O71.00		

Appendix C – ICD-10 CM CODES (K00- K95)

K00.0	K08.132	K14.5	K37	K51.318	K57.40	K71.3	K83.1
K00.1	K08.133	K14.6	K38.0	K51.319	K57.41	K71.4	K83.2
K00.2	K08.134	K14.8	K38.1	K51.40	K57.50	K71.50	K83.3
K00.3	K08.139	K14.9	K38.2	K51.411	K57.51	K71.51	K83.4
K00.4	K08.191	K20.0	K38.3	K51.412	K57.52	K71.6	K83.5
K00.5	K08.192	K20.8	K38.8	K51.413	K57.53	K71.7	K83.8
K00.6	K08.193	K20.9	K38.9	K51.414	K57.80	K71.8	K83.9
K00.7	K08.194	K21.0	K40.00	K51.418	K57.81	K71.9	K85.00
K00.8	K08.199	K21.9	K40.01	K51.419	K57.90	K72.00	K85.01
K00.9	K08.20	K22.0	K40.10	K51.50	K57.91	K72.01	K85.02
K01.0	K08.21	K22.10	K40.11	K51.511	K57.92	K72.10	K85.10
K01.1	K08.22	K22.11	K40.20	K51.512	K57.93	K72.11	K85.11
K02.3	K08.23	K22.2	K40.21	K51.513	K58.0	K72.90	K85.12
K02.51	K08.24	K22.3	K40.30	K51.514	K58.1	K72.91	K85.20
K02.52	K08.25	K22.4	K40.31	K51.518	K58.2	K73.0	K85.21
K02.53	K08.26	K22.5	K40.40	K51.519	K58.8	K73.1	K85.22
K02.61	K08.3	K22.6	K40.41	K51.80	K58.9	K73.2	K85.30
K02.62	K08.401	K22.70	K40.90	K51.811	K59.00	K73.8	K85.31
K02.63	K08.402	K22.710	K40.91	K51.812	K59.01	K73.9	K85.32
K02.7	K08.403	K22.711	K41.00	K51.813	K59.02	K74.0	K85.80
K02.9	K08.404	K22.719	K41.01	K51.814	K59.03	K74.1	K85.81
K03.0	K08.409	K22.8	K41.10	K51.818	K59.04	K74.2	K85.82
K03.1	K08.411	K22.9	K41.11	K51.819	K59.09	K74.3	K85.90
K03.2	K08.412	K23	K41.20	K51.90	K59.1	K74.4	K85.91
K03.3	K08.413	K25.0	K41.21	K51.911	K59.2	K74.5	K85.92
K03.4	K08.414	K25.1	K41.30	K51.912	K59.31	K74.60	K86.0
K03.5	K08.419	K25.2	K41.31	K51.913	K59.39	K74.69	K86.1
K03.6	K08.421	K25.3	K41.40	K51.914	K59.4	K75.0	K86.2
K03.7	K08.422	K25.4	K41.41	K51.918	K59.8	K75.1	K86.3
K03.81	K08.423	K25.5	K41.90	K51.919	K59.9	K75.2	K86.81
K03.89	K08.424	K25.6	K41.91	K52.0	K60.0	K75.3	K86.89
K03.9	K08.429	K25.7	K42.0	K52.1	K60.1	K75.4	K86.9
K04.01	K08.431	K25.9	K42.1	K52.21	K60.2	K75.81	K87
K04.02	K08.432	K26.0	K42.9	K52.22	K60.3	K75.89	K90.0
K04.1	K08.433	K26.1	K43.0	K52.29	K60.4	K75.9	K90.1
K04.2	K08.434	K26.2	K43.1	K52.3	K60.5	K76.0	K90.2

K04.3	K08.439	K26.3	K43.2	K52.81	K61.0	K76.1	K90.3
K04.4	K08.491	K26.4	K43.3	K52.82	K61.1	K76.2	K90.41
K04.5	K08.492	K26.5	K43.4	K52.831	K61.2	K76.3	K90.49
K04.6	K08.493	K26.6	K43.5	K52.832	K61.3	K76.4	K90.81
K04.7	K08.494	K26.7	K43.6	K52.838	K61.4	K76.5	K90.89
K04.8	K08.499	K26.9	K43.7	K52.839	K62.0	K76.6	K90.9
K04.90	K08.50	K27.0	K43.9	K52.89	K62.1	K76.7	K91.0
K04.99	K08.51	K27.1	K44.0	K52.9	K62.2	K76.81	K91.1
K05.00	K08.52	K27.2	K44.1	K55.011	K62.3	K76.89	K91.2
K05.01	K08.530	K27.3	K44.9	K55.012	K62.4	K76.9	K91.30
K05.10	K08.531	K27.4	K45.0	K55.019	K62.5	K77	K91.31
K05.11	K08.539	K27.5	K45.1	K55.021	K62.6	K80.00	K91.32
K05.20	K08.54	K27.6	K45.8	K55.022	K62.7	K80.01	K91.5
K05.211	K08.55	K27.7	K46.0	K55.029	K62.81	K80.10	K91.61
K05.212	K08.56	K27.9	K46.1	K55.031	K62.82	K80.11	K91.62
K05.213	K08.59	K28.0	K46.9	K55.032	K62.89	K80.12	K91.71
K05.219	K08.81	K28.1	K50.00	K55.039	K62.9	K80.13	K91.72
K05.221	K08.82	K28.2	K50.011	K55.041	K63.0	K80.18	K91.81
K05.222	K08.89	K28.3	K50.012	K55.042	K63.1	K80.19	K91.82
K05.223	K08.9	K28.4	K50.013	K55.049	K63.2	K80.20	K91.83
K05.229	K09.0	K28.5	K50.014	K55.051	K63.3	K80.21	K91.840
K05.30	K09.1	K28.6	K50.018	K55.052	K63.4	K80.30	K91.841
K05.311	K09.8	K28.7	K50.019	K55.059	K63.5	K80.31	K91.850
K05.312	K09.9	K28.9	K50.10	K55.061	K63.81	K80.32	K91.858
K05.313	K11.0	K29.00	K50.111	K55.062	K63.89	K80.33	K91.86
K05.319	K11.1	K29.01	K50.112	K55.069	K63.9	K80.34	K91.870
K05.321	K11.20	K29.20	K50.113	K55.1	K64.0	K80.35	K91.871
K05.322	K11.21	K29.21	K50.114	K55.20	K64.1	K80.36	K91.872
K05.323	K11.22	K29.30	K50.118	K55.21	K64.2	K80.37	K91.873
K05.329	K11.23	K29.31	K50.119	K55.30	K64.3	K80.40	K91.89
K05.4	K11.3	K29.40	K50.80	K55.31	K64.4	K80.41	K92.0
K05.5	K11.4	K29.41	K50.811	K55.32	K64.5	K80.42	K92.1
K05.6	K11.5	K29.50	K50.812	K55.33	K64.8	K80.43	K92.2
K06.010	K11.6	K29.51	K50.813	K55.8	K64.9	K80.44	K92.81
K06.011	K11.7	K29.60	K50.814	K55.9	K65.0	K80.45	K92.89
K06.012	K11.8	K29.61	K50.818	K56.0	K65.1	K80.46	K92.9
K06.013	K11.9	K29.70	K50.819	K56.1	K65.2	K80.47	K94.00

K06.020	K12.0	K29.71	K50.90	K56.2	K65.3	K80.50	K94.01
K06.021	K12.1	K29.80	K50.911	K56.3	K65.4	K80.51	K94.02
K06.022	K12.2	K29.81	K50.912	K56.41	K65.8	K80.60	K94.03
K06.023	K12.30	K29.90	K50.913	K56.49	K65.9	K80.61	K94.09
K06.1	K12.31	K29.91	K50.914	K56.50	K66.0	K80.62	K94.10
K06.2	K12.32	K30	K50.918	K56.51	K66.1	K80.63	K94.11
K06.3	K12.33	K31.0	K50.919	K56.52	K66.8	K80.64	K94.12
K06.8	K12.39	K31.1	K51.00	K56.600	K66.9	K80.65	K94.13
K06.9	K13.0	K31.2	K51.011	K56.601	K67	K80.66	K94.19
K08.0	K13.1	K31.3	K51.012	K56.609	K68.11	K80.67	K94.20
K08.101	K13.21	K31.4	K51.013	K56.690	K68.12	K80.70	K94.21
K08.102	K13.22	K31.5	K51.014	K56.691	K68.19	K80.71	K94.22
K08.103	K13.23	K31.6	K51.018	K56.699	K68.9	K80.80	K94.23
K08.104	K13.24	K31.7	K51.019	K56.7	K70.0	K80.81	K94.29
K08.109	K13.29	K31.811	K51.20	K57.00	K70.10	K81.0	K94.30
K08.111	K13.3	K31.819	K51.211	K57.01	K70.11	K81.1	K94.31
K08.112	K13.4	K31.82	K51.212	K57.10	K70.2	K81.2	K94.32
K08.113	K13.5	K31.83	K51.213	K57.11	K70.30	K81.9	K94.33
K08.114	K13.6	K31.84	K51.214	K57.12	K70.31	K82.0	K94.39
K08.119	K13.70	K31.89	K51.218	K57.13	K70.40	K82.1	K95.01
K08.121	K13.79	K31.9	K51.219	K57.20	K70.41	K82.2	K95.09
K08.122	K14.0	K35.2	K51.30	K57.21	K70.9	K82.3	K95.81
K08.123	K14.1	K35.3	K51.311	K57.30	K71.0	K82.4	K95.89
K08.124	K14.2	K35.80	K51.312	K57.31	K71.10	K82.8	
K08.129	K14.3	K35.89	K51.313	K57.32	K71.11	K82.9	
K08.131	K14.4	K36	K51.314	K57.33	K71.2	K83.0	

Appendix D – ICD-10 CM CODES (E10. E11, E13, O24 Series)

E10.10	E10.11	E10.21	E10.22	E10.29	E10.311	E10.319	E10.3211
E10.3212	E10.3213	E10.3219	E10.3291	E10.3292	E10.3293	E10.3299	E10.3311
E10.3312	E10.3313	E10.3319	E10.3391	E10.3392	E10.3393	E10.3399	E10.3411
E10.3412	E10.3413	E10.3419	E10.3491	E10.3492	E10.3493	E10.3499	E10.3511
E10.3512	E10.3513	E10.3519	E10.3521	E10.3522	E10.3523	E10.3529	E10.3531
E10.3532	E10.3533	E10.3539	E10.3541	E10.3542	E10.3543	E10.3549	E10.3551
E10.3552	E10.3553	E10.3559	E10.3591	E10.3592	E10.3593	E10.3599	E10.36
E10.37X1	E10.37X2	E10.37X3	E10.37X9	E10.39	E10.40	E10.41	E10.42
E10.43	E10.44	E10.49	E10.51	E10.52	E10.59	E10.610	E10.618
E10.620	E10.621	E10.622	E10.628	E10.630	E10.638	E10.641	E10.649
E10.65	E10.69	E10.8	E10.9	E11.00	E11.01	E11.21	E11.22
E11.29	E11.311	E11.319	E11.3211	E11.3212	E11.3213	E11.3219	E11.3291
E11.3292	E11.3293	E11.3299	E11.3311	E11.3312	E11.3313	E11.3319	E11.3391
E11.3392	E11.3393	E11.3399	E11.3411	E11.3412	E11.3413	E11.3419	E11.3491
E11.3492	E11.3493	E11.3499	E11.3511	E11.3512	E11.3513	E11.3519	E11.3521
E11.3522	E11.3523	E11.3529	E11.3531	E11.3532	E11.3533	E11.3539	E11.3541
E11.3542	E11.3543	E11.3549	E11.3551	E11.3552	E11.3553	E11.3559	E11.3591
E11.3592	E11.3593	E11.3599	E11.36	E11.37X1	E11.37X2	E11.37X3	E11.37X9
E11.39	E11.40	E11.41	E11.42	E11.43	E11.44	E11.49	E11.51
E11.52	E11.59	E11.610	E11.618	E11.620	E11.621	E11.622	E11.628
E11.630	E11.638	E11.641	E11.649	E11.65	E11.69	E11.8	E11.9
E13.00	E13.01	E13.10	E13.11	E13.21	E13.22	E13.29	E13.311
E13.319	E13.3211	E13.3212	E13.3213	E13.3219	E13.3291	E13.3292	E13.3293
E13.3299	E13.3311	E13.3312	E13.3313	E13.3319	E13.3391	E13.3392	E13.3393
E13.3399	E13.3411	E13.3412	E13.3413	E13.3419	E13.3491	E13.3492	E13.3493
E13.3499	E13.3511	E13.3512	E13.3513	E13.3519	E13.3521	E13.3522	E13.3523
E13.3529	E13.3531	E13.3532	E13.3533	E13.3539	E13.3541	E13.3542	E13.3543
E13.3549	E13.3551	E13.3552	E13.3553	E13.3559	E13.3591	E13.3592	E13.3593
E13.3599	E13.36	E13.37X1	E13.37X2	E13.37X3	E13.37X9	E13.39	E13.40
E13.41	E13.42	E13.43	E13.44	E13.49	E13.51	E13.52	E13.59
E13.610	E13.618	E13.620	E13.621	E13.622	E13.628	E13.630	E13.638
E13.641	E13.649	E13.65	E13.69	E13.8	E13.9	O24.011	O24.012
O24.013	O24.019	O24.02	O24.03	O24.111	O24.112	O24.113	O24.119
O24.12	O24.13	O24.311	O24.312	O24.313	O24.319	O24.32	O24.33
O24.811	O24.812	O24.813	O24.819	O24.82	O24.83		

Appendix E – ICD-10 CM CODES (M80.0 to M80.8 Series)

M80.00XA	M80.022S	M80.042P	M80.062K	M80.80XG	M80.829D	M80.849A	M80.862S
M80.00XD	M80.029A	M80.042S	M80.062P	M80.80XK	M80.829G	M80.849D	M80.869A
M80.00XG	M80.029D	M80.049A	M80.062S	M80.80XP	M80.829K	M80.849G	M80.869D
M80.00XK	M80.029G	M80.049D	M80.069A	M80.80XS	M80.829P	M80.849K	M80.869G
M80.00XP	M80.029K	M80.049G	M80.069D	M80.811A	M80.829S	M80.849P	M80.869K
M80.00XS	M80.029P	M80.049K	M80.069G	M80.811D	M80.831A	M80.849S	M80.869P
M80.011A	M80.029S	M80.049P	M80.069K	M80.811G	M80.831D	M80.851A	M80.869S
M80.011D	M80.031A	M80.049S	M80.069P	M80.811K	M80.831G	M80.851D	M80.871A
M80.011G	M80.031D	M80.051A	M80.069S	M80.811P	M80.831K	M80.851G	M80.871D
M80.011K	M80.031G	M80.051D	M80.071A	M80.811S	M80.831P	M80.851K	M80.871G
M80.011P	M80.031K	M80.051G	M80.071D	M80.812A	M80.831S	M80.851P	M80.871K
M80.011S	M80.031P	M80.051K	M80.071G	M80.812D	M80.832A	M80.851S	M80.871P
M80.012A	M80.031S	M80.051P	M80.071K	M80.812G	M80.832D	M80.852A	M80.871S
M80.012D	M80.032A	M80.051S	M80.071P	M80.812K	M80.832G	M80.852D	M80.872A
M80.012G	M80.032D	M80.052A	M80.071S	M80.812P	M80.832K	M80.852G	M80.872D
M80.012K	M80.032G	M80.052D	M80.072A	M80.812S	M80.832P	M80.852K	M80.872G
M80.012P	M80.032K	M80.052G	M80.072D	M80.819A	M80.832S	M80.852P	M80.872K
M80.012S	M80.032P	M80.052K	M80.072G	M80.819D	M80.839A	M80.852S	M80.872P
M80.019A	M80.032S	M80.052P	M80.072K	M80.819G	M80.839D	M80.859A	M80.872S
M80.019D	M80.039A	M80.052S	M80.072P	M80.819K	M80.839G	M80.859D	M80.879A
M80.019G	M80.039D	M80.059A	M80.072S	M80.819P	M80.839K	M80.859G	M80.879D
M80.019K	M80.039G	M80.059D	M80.079A	M80.819S	M80.839P	M80.859K	M80.879G
M80.019P	M80.039K	M80.059G	M80.079D	M80.821A	M80.839S	M80.859P	M80.879K
M80.019S	M80.039P	M80.059K	M80.079G	M80.821D	M80.841A	M80.859S	M80.879P
M80.021A	M80.039S	M80.059P	M80.079K	M80.821G	M80.841D	M80.861A	M80.879S
M80.021D	M80.041A	M80.059S	M80.079P	M80.821K	M80.841G	M80.861D	M80.88XA
M80.021G	M80.041D	M80.061A	M80.079S	M80.821P	M80.841K	M80.861G	M80.88XD
M80.021K	M80.041G	M80.061D	M80.08XA	M80.821S	M80.841P	M80.861K	M80.88XG
M80.021P	M80.041K	M80.061G	M80.08XD	M80.822A	M80.841S	M80.861P	M80.88XK
M80.021S	M80.041P	M80.061K	M80.08XG	M80.822D	M80.842A	M80.861S	M80.88XP
M80.022A	M80.041S	M80.061P	M80.08XK	M80.822G	M80.842D	M80.862A	M80.88XS
M80.022D	M80.042A	M80.061S	M80.08XP	M80.822K	M80.842G	M80.862D	
M80.022G	M80.042D	M80.062A	M80.08XS	M80.822P	M80.842K	M80.862G	
M80.022K	M80.042G	M80.062D	M80.80XA	M80.822S	M80.842P	M80.862K	
M80.022P	M80.042K	M80.062G	M80.80XD	M80.829A	M80.842S	M80.862P	

Appendix F – SHAFAFIYA DRUG CODES FOR INSULIN AND ANTI-DIABETIC DRUGS

J58-4690-02976-02	H21-2691-06812-01	L99-0215-02578-01	H07-7236-07231-01
J58-4690-02976-01	E40-2405-02995-01	A07-2188-03690-01	J45-2088-05843-01
C48-2175-02977-01	M34-2558-02996-01	F91-1627-03691-01	J21-2657-05838-01
CD9-9774-10095-01	J58-3346-02997-01	I68-2223-03691-01	J10-3857-03682-02
CH1-3727-02982-02	J58-3347-02997-01	L99-0215-02575-01	J10-3231-03682-02
Q35-9218-09382-01	J58-3349-02998-01	G12-0215-02576-01	O70-3231-03682-01
E40-7289-07289-01	J58-3348-02998-01	B46-5682-01576-01	J21-2657-05839-01
E40-8594-07289-02	J58-3351-02999-02	B46-5682-01577-01	J10-3231-03683-02
E40-8595-07289-02	J58-3350-02999-01	B46-5682-01578-01	O70-3231-03683-01
E40-8594-08488-02	J58-3352-02999-01	B46-5682-01579-01	J10-3857-03683-02
H21-2692-02978-02	J58-3351-02999-01	N37-A275-10846-01	J21-2657-05840-01
H21-2692-02978-01	J58-3353-03000-01	G95-5962-06158-01	R43-9647-09902-01
J58-5275-02985-02	J58-3354-03000-01	G95-5962-06157-01	I68-2214-03684-01
J58-5275-02986-01	J58-3356-03001-01	G95-5962-06156-01	S32-7147-03684-01
J58-5976-06176-01	J58-3355-03001-01	G95-5962-06155-01	H21-5978-03684-01
J58-2898-02987-01	H98-2406-03002-01	N41-5533-00205-01	S02-7148-03684-01
J58-2897-02987-01	H98-2407-03003-01	N41-5533-00206-01	S32-1358-03685-01
E44-0538-02988-01	H98-2408-03004-01	J10-3857-03687-01	J23-3573-03685-01
E44-0538-02988-02	E40-2404-03004-01	H37-3227-03687-01	J10-3857-03685-05
L78-2845-02989-01	E40-2403-03004-01	H21-1352-03687-01	I68-2213-03685-01
L78-2842-02989-01	H21-6714-06811-01	I68-2213-03687-01	H21-1352-03685-01
L78-2843-02989-01	H21-2690-03005-01	K54-2242-03687-01	H78-4171-03685-01
E40-2413-02979-01	H98-2409-03006-01	N71-1358-03687-01	J10-3857-03685-01
E40-2411-02979-01	H98-2410-03007-01	J23-3573-03687-01	D86-6222-03685-01
I01-2411-02980-01	H98-2395-03008-02	J82-1405-03687-02	F88-2182-03685-01
J58-3733-02981-01	E40-2395-03008-01	J82-1405-03687-01	D01-2780-05032-01
J58-3732-02981-01	H98-2395-03008-01	H78-4171-03687-01	D01-2780-05033-01
J58-3734-02981-01	H98-2398-03009-01	D01-2780-05034-01	I73-2661-05112-01
J58-3727-02982-01	E40-2395-06148-01	I73-2661-05115-01	I73-2661-05113-01
J58-3727-02982-02	H98-2396-03010-01	H21-5468-05116-01	I72-2660-05114-01
J58-3727-02983-01	E40-2397-03010-01	I72-2660-05116-01	H21-5468-05114-01
J58-3727-02983-02	H98-2395-03010-01	J45-2088-05842-01	J45-2088-05841-01
J58-3727-02984-02	H98-2396-03011-01	S34-7718-07589-02	R43-9647-09900-01
J58-3727-02984-01	H98-2395-03011-01	S34-7718-07589-01	H78-4172-03686-01
J58-5275-02985-01	J58-0081-03012-02	R43-9647-09901-01	J23-3574-03686-01
L78-2844-02989-01	J58-0080-03012-01	I68-2214-03688-01	F88-2183-03686-01
L78-5246-02990-01	J58-0081-03012-01	H21-5978-03688-01	D22-0620-03686-01
L78-5246-06551-01	M34-2559-03013-01	S02-7148-03688-01	Q19-6593-03686-01
L80-6001-06204-01	M34-2560-03014-01	N71-1358-03689-01	I68-2214-03686-01
P37-6001-06203-01	J58-5367-03015-01	J10-3857-03689-02	H21-5978-03686-01
L78-0325-02991-03	J58-3378-03016-01	J23-3573-03689-01	N01-2018-03687-01
L78-0325-02991-02	CL3-9846-10215-01	N01-2018-03689-01	N37-3230-03687-01
L78-0325-02991-01	C83-2668-03450-01	J82-1405-03689-01	C81-6076-06273-01

B62-0326-02991-01	C80-2668-03450-01	K54-2242-03689-01	C81-6076-06270-01
E40-2412-02992-01	C83-2668-03451-01	H21-1352-03689-01	C81-6076-06271-01
J58-2556-02993-01	C80-2668-03451-01	I68-2213-03689-01	C81-6076-06272-01
J58-2557-02993-01	I68-2223-06899-01	J82-1405-03689-02	I72-7082-07116-01
J58-2556-02993-02	F91-1627-03692-01	F88-2182-03689-01	I72-7082-07117-01
J58-2555-02993-01	I68-2223-03692-01	H78-4171-03689-01	
H21-2691-02994-01	G12-0216-02577-01	N37-3230-03689-01	

Appendix G – SHAFAFIYA DRUG CODES of common Anti-hypertensive Drugs

J21-5728-03511-01	J45-1781-00311-01	J10-0593-00513-01	K34-0718-00297-01
I72-2471-03511-01	J21-2514-00311-01	H37-5136-00513-01	J45-1781-00311-01
N01-4930-03511-01	V30-9118-00311-01	D22-0442-00513-01	J21-2514-00311-01
N84-3028-03513-01	H21-7472-00311-01	B48-0586-03769-01	V30-9118-00311-01
N01-4930-03513-01	J45-1781-00312-01	B46-0586-03769-01	H21-7472-00311-01
H95-3030-03513-01	J21-2514-00312-01	C04-3254-03769-01	J45-1781-00312-01
EC5-A542-03513-01	H21-7472-00312-01	R43-7402-07369-01	J21-2514-00312-01
H21-2996-03513-01	H95-7015-00307-01	K72-3254-03768-01	H21-7472-00312-01
F91-4733-03513-01	J21-2513-00307-01	J45-3013-03768-01	M40-6366-04449-01
J21-5728-03513-01	V30-8078-00307-01	D56-3014-03770-01	M40-5302-04449-01
I72-2471-03513-01	N37-8214-00307-01	R43-7402-07370-01	H92-3500-02960-01
R43-6807-03513-01	J45-1780-00307-01	K14-3254-03771-01	M40-6364-04447-01
L42-7298-03510-01	J23-7648-00307-01	J45-3013-03772-01	M40-5302-04447-01
J21-5728-03512-01	H21-7471-00307-01	O94-6964-07037-02	J30-6917-00301-01
I72-2023-03512-01	J45-1780-00308-01	T35-6964-07037-02	M08-4802-00301-01
R43-6807-03512-01	J21-2513-00308-01	T20-6964-07037-01	M08-4802-00302-01
N01-4930-03512-01	H21-7471-00308-01	K14-6964-07037-01	H68-7156-00302-01
N84-3028-03512-01	V30-8078-00309-01	T20-3254-07408-01	J30-6919-00302-01
F91-4733-03512-01	J45-1780-00309-01	G33-3250-03773-01	J23-0243-00287-02
H95-3030-03512-01	H21-7471-00309-01	A84-2801-03246-01	J23-0243-00287-01
J23-0371-03508-01	J21-2513-00309-01	O01-5260-03246-01	J23-0243-00288-02
L81-3045-03508-01	N37-8219-00309-01	R65-5260-03246-01	J23-0243-00288-01
N84-3027-03509-01	J23-7648-00309-01	Q72-5260-03246-01	BH6-9195-09611-02
H95-3029-03509-01	H95-7016-00309-01	B31-5260-03246-02	BH6-9195-09611-03
R43-6806-03509-01	H21-7471-00310-01	B31-5260-03246-01	D86-0238-00289-01
N01-4928-03510-01	J45-1780-00310-01	B31-5260-03247-01	N37-3035-00289-01
L81-3045-03510-01	N37-8213-00310-01	A84-8905-03247-02	J21-0057-00289-01
I72-1150-03510-01	J21-2513-00310-01	A84-2801-03247-01	K06-1227-00289-01
J30-2361-03510-01	J21-2514-00313-01	B31-5260-03247-02	M40-6360-04440-01
J23-0371-03510-01	H21-7472-00313-01	O65-2802-03248-03	M40-1144-04440-01
F91-4732-03510-01	J45-1781-00313-01	O65-2802-03248-01	M40-1144-04442-01
H95-3029-03510-01	V30-9118-00313-01	C30-2802-03248-01	M40-6362-04442-01
EC5-A540-03510-01	H21-7472-00314-01	G45-2801-03248-01	G33-6197-06379-01
J10-3031-03510-01	J21-2514-00314-01	C31-2801-03248-01	G33-6197-06380-01
R43-6806-03510-01	J45-1781-00314-01	A53-2801-03248-02	V30-A298-00305-01
J30-2361-03508-01	H21-7564-05777-02	A53-2801-03248-01	C83-5340-00305-01
I72-1150-03508-01	N84-5240-05777-01	F61-5260-03248-01	H95-7015-00307-01
L42-7298-03508-01	N37-5078-05777-01	W55-8261-03248-01	J21-2513-00307-01
N01-4929-03508-01	M08-7094-05777-01	U44-2802-03248-01	V30-8078-00307-01
J30-2361-03508-02	J23-1787-05777-01	L58-2801-03248-01	N37-8214-00307-01

R43-6806-03508-01	J10-4965-05777-01	B08-7197-00986-01	J45-1780-00307-01
H95-3029-03508-01	V30-9459-05777-01	F83-1119-00986-01	J23-7648-00307-01
J10-3031-03508-01	N37-5078-05780-01	C42-7269-00987-01	H21-7471-00307-01
F91-4732-03508-01	H21-7564-05780-02	E74-1396-00987-01	J45-1780-00308-01
J21-5727-03508-01	J21-5415-05780-01	K54-0824-00987-01	J21-2513-00308-01
V30-A394-11049-01	K54-A346-10903-02	Q77-7196-00987-01	H21-7471-00308-01
CD4-A394-11049-01	K54-A346-10904-02	B08-7197-00988-01	G93-0268-00291-01
H21-2995-03510-01	H21-9798-05781-02	K54-0824-00988-01	L42-5450-00292-01
J21-5727-03510-01	H21-7564-05777-01	E74-1396-00988-01	H07-9195-09244-02
J30-2361-03510-02	F91-5410-05777-01	C42-7269-00988-01	BH6-9195-09244-02
N84-3027-03510-01	H68-0955-05777-01	Q77-7196-00988-01	D86-0238-00293-01
CD4-A394-11112-02	H68-8509-05777-02	A23-4754-05827-01	N68-3042-00293-02
C80-3271-05398-01	J23-1787-05777-02	G45-6527-05828-01	H95-3096-00290-01
F91-5834-05398-01	J30-5435-05777-01	G44-5484-05828-01	I61-2994-00290-01
V30-8512-05398-02	J21-5415-05777-01	A15-2625-05829-01	J21-0057-00290-01
I16-5892-05398-01	J45-1409-05777-01	A15-5109-06667-01	J30-0240-00290-02
C80-3271-05399-01	H17-2678-05777-01	A41-5484-05830-01	J30-0240-00290-01
F91-5834-05399-01	N37-9277-09317-01	T42-5484-05830-02	G05-0826-00290-01
I16-5892-05399-01	N37-9277-09318-01	O57-5484-05830-01	G22-2636-00290-01
C83-3271-05400-01	J30-5435-05778-01	X79-2624-05831-02	K31-3713-00290-01
V30-A298-00305-01	J23-1787-05778-02	G46-5484-05831-01	G93-0268-00289-01
C83-5340-00305-01	H21-7564-05778-01	A91-5484-05831-01	H21-0239-00293-01
V30-A298-00306-01	J23-1787-05778-01	G33-6195-05831-01	J21-0057-00293-01
C83-5340-00306-01	H68-0955-05778-01	X31-2624-08090-02	A49-3043-00293-01
Q19-6322-05396-01	H68-8509-05778-02	A15-2624-05832-01	G93-0268-00293-01
Q51-6453-05396-01	N37-5078-05778-01	N78-5483-05826-01	N37-3035-00293-01
C83-3270-05396-01	M08-7094-05778-01	O57-5484-05824-01	F91-2199-00293-01
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		Summary of Revisions July 2023	
Note: Revisions are based on the feedback received from the SMEs, to be aligned with the international best practices & for further clarification on the specification criteria.			
KPI #	KPI Title	Revisions	Reasons for revision
	Who is this guidance for?	Added: All the Jawda KPIs are applicable to patient encounters* with the family medicine consultant or general practitioner. This is in alignment with the DOH primary care standard. For further details, kindly refer to the following available at https://www.doh.gov.ae/en/resources/standards and https://www.doh.gov.ae/en/resources/guidelines - DOH Standard for Primary Healthcare Services in Emirate of Abu Dhabi (September 2022) - Scope of Practice Guidelines for Licensed Healthcare Professionals (Family Medicine) (July 2022) - Scope of Practice for General Practitioner (October 2022) *The KPI definitions are not applicable to other specialty physician encounters e.g. paediatrician, dental, homeopathic etc.	To align with the DOH Primary Care Standard
All relevant KPI	All relevant KPIs	Added in the denominator guidance: The consultations should be by the same provider, however can be by the same or different Primary care physician/s (for KPIs with multiple visit criteria). These would be family medicine consultants or general practitioners. In case of multiple consultation visits within the reporting quarter, please consider any visit after	To align with the DOH Primary Care Standard Clarification on specific criteria

		applying the exclusion criteria e.g. ABM mandate encounters excluded. Added in the denominator exclusions (for adult KPIs): All ABM Mandate encounters Added in the denominator exclusions (for paediatric KPIs): All ABM Mandate encounters, except Well Child and Immunization Mandate encounters. Added in denominator exclusions for cancer and chronic disease KPIs: within the denominator time frame	
	All KPIs with specific age requirements	Added: symbols (≤ and ≥) for the age range	To align with the age requirement of the measures
All relevant KPI	All relevant KPIs	Added teleconsultation codes: 01-01, 01-02, 01-03 & 01-04	Clarification on specific criteria
PC001	Breast Cancer Screening	Added in the Denominator Exclusion: Have any active breast complaints such as a lump or nipple discharge (during the reporting quarter). Are known case or have a previous history of (within the denominator time frame)	To clarify that the symptom free status is only applicable in the reporting quarter visit/s. To clarify the criteria
PC002	Cervical Cancer Screening	Added in the Denominator Exclusion: Individuals with any active cervix issues or complaints (during the reporting quarter) and added the codes. Patients who had their cervix removed and/or a total hysterectomy with no residual cervix for benign indications or a congenital absence of cervix (within the denominator time frame)	To clarify that the symptom free status is only applicable in the reporting quarter visit/s. To clarify the criteria
PC003	Colorectal Cancer Screening	Added in the Denominator Exclusion: Have any active bowel issues or complaints (during the reporting quarter) and added the codes (within the denominator time frame)	To clarify that the symptom free status is only applicable in the reporting quarter visit/s. To clarify the criteria

PC004	Depression screening	Added in the Denominator Exclusion: Individuals who do not qualify for depression screening insurance benefits ever been diagnosed with depression and bipolar disorder (since 18 years of age) Added numerator encounter up to 365 days. Added patient Health Questionnaire (PHQ-2)	To align with the denominator requirement of the measures
PC005	Depression follow up care plan	Added in the Denominator Exclusion: Individuals who do not qualify for insurance benefits	To align with the denominator requirement of the measures
PC006	Comprehensive oral screening	Added in the denominator guidance dental general practitioners along with family medicine consultants or general practitioners.	To align with scope of work of consultants.
PC009-PC013	Diabetes KPIs	Added in the Denominator Exclusion: (within the denominator time frame)	To align with the denominator requirement of the measures
PC014	Controlling High Blood Pressure	Age correction in the denominator; 18 – 85 years Revised in the Numerator Guidance: If there are multiple blood pressure readings on the same day, use the reading with both the systolic and diastolic being in the normal range (numerator values) as the most recent blood pressure reading Added in the Denominator Exclusion: (within the denominator time frame)	To align with the age requirement of the measures To clarify the criteria
PC015	Hypertension: Annual dyslipidaemia screening rate	Age correction in the denominator; 18 – 85 years Added in the Denominator Exclusion: (within the denominator time frame)	To align with the age requirement of the measures To clarify the criteria
PC016	Hypertension: Medical Attention for Nephropathy	Age correction in the denominator; 18 – 85 years Added in the Denominator Exclusion: (within the denominator time frame)	To align with the age requirement of the measures To clarify the criteria
PC017	Screening for Osteoporosis for Women Aged 65-85 Years of Age	Changed title to "Screening for Osteoporosis for Women Aged 60 Years of Age and Above" Added in Denominator Guidance: The consultations should be by the same provider, however can be by the same or different Primary	To align with the DOH primary care standard To clarify the criteria

		care physician/s. These would be family medicine consultants or general practitioners.	
		Face to face or telemedicine consultations should be included	
		In case of multiple consultation visits within prior months, please consider the earliest one.	
		In case of multiple consultation visits within the reporting quarter, please consider any visit after applying the exclusion criteria (e.g. ABM mandate encounters excluded)	
		Removed Denominator Exclusion: Already screened individuals	
		Added in Numerator: during the performance period	
PC018	Childhood Immunization Status	Removed Hep A and Flu Vaccines	To align with the childhood immunization schedule and to clarify the criteria.
		Added in the Numerator Guidance	
		Vaccinations administered can be in the same or another facility.	
		Include referral of children to facilities that are offering Well Child Services consistent with the Government Mandated Funds requirements (for those who do not have insurance coverage).	
		Removed from the numerator guidance:	
		The measure calculates a rate for each vaccine and three combination	
		rates	
		The measure allows a grace period by measuring compliance with	
		these recommendations between birth and age two.	
		• Added in the Denominator Exclusions: All ABM Mandate encounters, except Well Child and Immunization Mandate encounters.	

PC019-PC021	KPIs for Well Child Visits	Added in the Numerator Guidance: Please refer DOH Standard Well Child visits (0-6 years). Screening can be done in the same or another facility. Include referral of children to facilities that are offering Well Child Services consistent with the Government Mandated Funds requirements (for those who do not have insurance coverage). Added in the Denominator Exclusions: All ABM Mandate encounters, except Well Child and Immunization Mandate encounters.	To align with the DOH Standard Well Child visits (0-6 years) and to clarify the criteria.
PC019-PC021	Developmental Screening	Added in Performance Met Criteria: specific age range	To clarify the age range
PC022	Outpatient Referral Rate	Added in Numerator Guidance: Count all outpatient visits with referrals regardless of service lines, excluding same specialty (e.g. Family Medicine to Family Medicine /GP clinics). Added in Denominator Guidance: The consultations should be by the same provider, however can be by the same or different Primary care physician/s. These would be family medicine consultants or general practitioners.	To clarify the numerator and denominator definition