

2020 STAR REPORTING TOOL

HEDIS CPT II CODES: Reporting Quality Measures for Medicare Advantage	
Measure	Appropriate Codes
Controlled Blood Pressure (CBP)* Systolic	3074F Most recent systolic blood pressure is < 130mmHg 3075F Most recent systolic blood pressure is between 130-139mmHg 3077F Most recent systolic blood pressure is ≥ 140mmHg
	3078F Most recent diastolic blood pressure is < 80mmHg 3079F Most recent diastolic blood pressure is between 80-89mmHg 3080F Most recent diastolic blood pressure is ≥ 90mmHg
Care for Older Adults (COA) Advance Care Planning	1123F Advance care plan discussed & documented or surrogate decision maker documented in medical record 1124F Advance care plan discussed & documented, patient unable to name surrogate decision maker & provide advance care plan 1157F Advance care plan or similar legal document present in medical record 1158F Advanced care planning discussion documented in medical record
Medication Review*	1159F Medication list documented in medical record 1160F Review of medications by prescribing practitioner or clinical pharmacist documented in medical record
Functional Assessment	1170F Functional status assessed
Pain Assessment	1125F Pain severity quantified; pain present 1126F Pain severity quantified; no pain present
Comprehensive Diabetes Care (CDC) Hemoglobin A1c Screening (HbA1c)	3044F Most recent HbA1c is < 7.0% 3051F Most recent HbA1c ≥ 7.0% and < 8.0% 3052F Most recent HbA1c ≥ 8.0% and ≤ 9.0% 3046F Most recent HbA1c is > 9.0%
Attention for Nephropathy	3060F Positive microalbuminuria test reviewed and documented 3061F Negative microalbuminuria test reviewed and documented 3062F Positive macroalbuminuria test reviewed and documented 3066F Documentation of treatment for nephropathy 4010F ACE Inhibitor or ARB therapy prescribed or currently taken
Eye Exam (Retinal)	2022F Dilated retinal eye exam with interpretation by eye specialists documented and reviewed <i>with evidence of retinopathy</i> 2023F Dilated retinal eye exam with interpretation by eye specialists documented and reviewed <i>without evidence of retinopathy</i> 2024F 7 standard field stereoscopic photos with interpretation by eye specialist documented and reviewed <i>with evidence of retinopathy</i> 2025F 7 standard field stereoscopic photos with interpretation by eye specialist documented and reviewed <i>without evidence of retinopathy</i> 2026F Eye imaging validated to match diagnosis from 7 standard field stereoscopic photos results documented and reviewed <i>with evidence of retinopathy</i> 2033F Eye imaging validated to match diagnosis from 7 standard field stereoscopic photos results documented and reviewed <i>without evidence of retinopathy</i> 3072F Low risk for retinopathy (no evidence of retinopathy in prior year)
Medication Reconciliation Post-Discharge (MRP)	1111F Discharge medications reconciled with the current medication list in the outpatient medical record

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Billing CPT II Codes Benefits Providers

Arizona Priority Care (AZPC) asks providers to include CPT Category II Codes in your claims to improve the efficiency of closing care gaps. Submitting these codes will help identify clinical outcomes, increase STAR scores, and overall reduce the need to request additional chart notes during the chart collection season.

Depending on clearinghouses, codes may require you to include a \$0.01 charge to avoid denials of “non-payable code.”

** Measure(s) require two CPT II Codes on the same encounter for measure compliance*

For questions & comments, contact STARS Department by emailing HCC.STARS@azprioritycare.com.
To submit medical records to STARS, fax 480-403-8219 or contact your Provider Relations Representative for qHMO (documentation) assistance.

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