

HEDIS HINTS – APP, APM, APC

- Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)
- Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)
- Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC)

What are the Measures?

These three measures assess key care components related to treatment of patients' ages 1-17 years who have a new or existing prescription for an antipsychotic medication.

- APP - Percentage of children and adolescents 1-17 years of age who had a new prescriptions for an antipsychotic medication and documentation of psychosocial care as first line treatment
- APM - Percentage of children and adolescents 1-17 years of age who had two or more antipsychotic prescriptions and had metabolic testing.
- APC - Percentage of children and adolescents 1-17 years of age who were on two or more concurrent antipsychotic medications for at least 90 consecutive days during the measurement year.

Why are these measures important?

Antipsychotic prescribing in children and adolescents has increased rapidly in recent decades. Approximately 1 in 10 of those prescribed an antipsychotic are prescribed more than one antipsychotic at the same time. Multiple antipsychotics in children and adolescents can create serious health concerns. Those health effects include: weight gain, extrapyramidal side effects, hyperprolactinemia and some metabolic effects. These HEDIS measures can highlight potentially unsafe use of antipsychotic medications in the child and adolescent population.

How can I improve my HEDIS scores?

Documentation and correct coding are key to improving HEDIS scores. Members' clinical documentation must include:

- Psychosocial care was done as first line treatment for support and safety.
- A trial of therapy prior to medication initiation is recommended.
 - At least 2 visits in an outpatient intensive outpatient hospitalization setting is an example. Codes to include are CPT, HCPC, or CPT with POS codes on different dates.
- The diagnosis includes schizophrenia, bipolar disorder, or other psychotic disorder.
- Monitoring of renal and liver function. This is significant because the drugs are metabolized through the kidneys and liver.
- Routine annual monitoring of the metabolic profile:
 - HBA1C
 - Serum LDL-C
 - Serum Cholesterol

Lab CPT Codes:	Glucose tests: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951	HBA1c tests: 83036, 83037, 3044F, 3045F, 3046F	LDL-C tests: 80061, 83700, 83701, 83704,83721,3048F,3049F, 3050F Cholesterol tests other than LDL Value Set: 82365, 83718, 84478,
ICD-10-CM Diagnosis	Schizophrenia: F20.0 - F20.3, F20.5, F20.81, F20.89, F20.9, F25.0, F25.1, F25.8, F25.9	Bipolar Disorder: F30.10 - F30.13, F30.2 - F30.4, F30.8, F30.9, F31.0, F31.10 – F31.13, F31.2., F31.30 - F31.32, F31.4, F31.5, F31.60 - F31.64, F31.70 - F31.78	Other Psychiatric Disorders: F22, F23, F24, F28, F29, F32.3, F33.3, F84.0, F84.2, F84.3, F84.5, F84.8, F84.9, F95.0, F95.1, F95.2, F95.8, F95.9
CPT Codes	Psychological Care: 90832 - 90834, 90836 - 90840, 90845 - 90847, 90849, 90853, 90875, 90876, 90880,		HCPCS Psychological Care: G0176, G0177, G0409 - G0411, H0004, H0035 - H0040, H2000, H2001, H2011 - H2014, H2017 - H2020, S0201, S9480, S9484, S9485 With or without a telehealth modifier: 95, GT

Reference: National Committee for Quality Assurance. (2018). HEDIS 2019 Volume2 Technical Specifications For Health Plans Washington, DC 20005: American Medical Association. Pg 227-228, 269-272, 334-337.