

Trinity Health Plan New York Incentive for Using CPT Category II Codes

WHAT IS THE INCENTIVE PROGRAM?

As a network provider, you can earn an incentive for submitting accurate CPT Category II codes through claims. Depending on the measure, you can earn up to \$65 for each claim that closes HEDIS gaps.

WHAT IS A CPT CATEGORY II CODE?

Category II codes simplify how performance measures are reported. Correct codes also eliminate the need for chart abstraction and make it easier to track the delivery of quality care.

WHY SHOULD I USE A CPT CATEGORY II CODE?

When you use these codes for specific services performed during an office visit, you:

- Quickly identify and close gaps in care, which increases your incentive performance.
- Support your care plan through targeted case management services.
- Deliver access to accurate medical data.
- Decrease the need for Trinity Health Plan New York to request your patient's chart.

The following chart outlines applicable HEDIS measures, correct codes and specific incentive amounts.

If you have questions, please email starsandhedis@mchs.com.



*Certain measures can only be claimed once a year. The incentive is subject to change according to NCOA HEDIS specifications and at Trinity Health Plan New York discretion.

	MEASURE	CATEGORY II CPT CODE	INCENTIVE
EED	Care for Patients with Diabetes-Retinal Eye Exam <i>(One time per year)</i>	2022F Filed with ICD-10 Diag Codes: ICD-10-E10.9, E10.10-E13.9, O24.011-O24.33, O24.811-O24.83	\$20
		2023F Filed with ICD-10 Diag Codes: ICD-10-E10.9, E10.10-E13.9, O24.011-O24.33, O24.811-O24.83	\$20
		2024F Filed with ICD-10 Diag Codes: ICD-10-E10.9, E10.10-E13.9, O24.011-O24.33, O24.811-O24.83	\$20
		2025F Filed with ICD-10 Diag Codes: ICD-10-E10.9, E10.10-E13.9, O24.011-O24.33, O24.811-O24.83	\$20
		2026F Filed with ICD-10 Diag Codes: ICD-10-E10.9, E10.10-E13.9, O24.011-O24.33, O24.811-O24.83	\$20
		2033F Filed with ICD-10 Diag Codes: ICD-10-E10.9, E10.10-E13.9, O24.011-O24.33, O24.811-O24.83	\$20
GSD	Care for Patients with Diabetes-HbA1c level less than 7.0 <i>(Diabetic members only.)</i>	3044F Filed with ICD-10 Diag Codes: ICD-10-E10.9, E10.10-E13.9, O24.011-O24.33, O24.811-O24.83	\$10
	Care for Patients with Diabetes-HbA1c level greater than 9.0 <i>(Diabetic members only.)</i>	3046F Filed with ICD-10 Diag Codes: ICD-10-E10.9, E10.10-E13.9, O24.011-O24.33, O24.811-O24.83	\$10
	Care for Patients with Diabetes-HbA1c level greater than or equal to 7.0 and less than 8.0 <i>(Diabetic members only.)</i>	3051F Filed with ICD-10 Diag Codes: ICD-10-E10.9, E10.10-E13.9, O24.011-O24.33, O24.811-O24.83	\$10
	Care for Patients with Diabetes-HbA1c level greater than or equal to 8.0 and less than 9.0 <i>(Diabetic members only.)</i>	3052F Filed with ICD-10 Diag Codes: ICD-10-E10.9, E10.10-E13.9, O24.011-O24.33, O24.811-O24.83	\$10
CBP	Controlling Blood Pressure-Systolic <i>(Essential Hypertensive members only.)</i>	3074F Filed with ICD-10 Diag Codes: I10	\$5
	Controlling Blood Pressure-Systolic <i>(Essential Hypertensive members only.)</i>	3075F Filed with ICD-10 Diag Codes: I10	\$5
	Controlling Blood Pressure-Systolic <i>(Essential Hypertensive members only.)</i>	3077F Filed with ICD-10 Diag Codes: I10	\$5
	Controlling Blood Pressure-Diastolic <i>(Essential Hypertensive members only.)</i>	3078F Filed with ICD-10 Diag Codes: I10	\$5
	Controlling Blood Pressure-Diastolic <i>(Essential Hypertensive members only.)</i>	3079F Filed with ICD-10 Diag Codes: I10	\$5
	Controlling Blood Pressure-Diastolic <i>(Essential Hypertensive members only.)</i>	3080F Filed with ICD-10 Diag Codes: I10	\$5
MRP	Medication Reconciliation Post-Discharge	1111F	\$25

*Please note that the codes listed here, when applied correctly, will result in closure of an identified care opportunity. This is not a guarantee of benefits or payment. Benefits are subject to the terms and limitations of the plan.