

CPT Category II Codes Can Help Close Care Gaps

Using the proper **Current Procedural Terminology (CPT®) Category II codes** when filing claims can help streamline your administrative processes and ensure gaps in care are closed.

Why it matters: CPT II codes are tracked for certain performance measures, including Healthcare Effectiveness Data and Information Set (HEDIS®) measures from the [National Committee for Quality Assurance \(NCQA\)](#). We use these measures to monitor and improve the quality of care our members receive.

How CPT II Codes Can Help: CPT II codes are more specific than CPT I codes. When submitted for services performed during office, lab or facility visits, CPT II codes can help:

- Provide more accurate medical data and decrease requests for members' records for review
- Identify and close gaps in care more accurately and quickly; this drives HEDIS measures and quality improvement initiatives
- Track member screenings to help you monitor care and avoid sending unnecessary reminders

How to Submit CPT II Codes: CPT II codes may be submitted on claims with other applicable codes. The list of CPT II codes is updated annually according to HEDIS specifications published by NCQA. See our [Claims and Eligibility](#) webpage for claims filing tips.

Here are examples of 2021 measurement year HEDIS measures and applicable codes.

CPT II Coding Quick Reference		
HEDIS Measure	Description	Applicable Codes
Controlling High Blood Pressure (CBP)	<p>Members ages 18-85 with a diagnosis of hypertension (HTN) and BP adequately controlled at 139/89 mmHg or less during the measurement year</p> <ul style="list-style-type: none"> • A diagnosis of Essential Hypertension should be documented in the medical record. • Last blood pressure reading in 2021 	<p>Hypertension Diagnosis</p> <p>ICD-10-CM: I10, I11.9, I12.9, I13.10 (Essential Hypertension)</p> <p>CPT II:</p> <p>3074F (systolic <130 mmHg) 3075F (systolic =130-139 mmHg) 3077F (systolic >140 mmHg) 3078F (diastolic <80 mmHg) 3079F (diastolic =80-89 mmHg) 3080F (diastolic > 90 mmHg)</p> <p>Remote BP Monitoring</p> <p>CPT: 93784, 93788, 93790, 99091</p>

CPT Category II Codes Can Help Close Care Gaps, cont.

CPT II Coding Quick Reference		
HEDIS Measure	Description	Applicable Codes
Comprehensive Diabetes Care (CDC)	Members ages 18-75 diagnosed with diabetes who have documentation in their medical record indicating the date and result of a Hemoglobin A1c test in the measurement year <ul style="list-style-type: none"> Last A1c result in 2021 	HbA1c level less than 7.0 ICD-10-CM: E10.10-E13.9, O24.011-O24.33, O24.811-O24.83 CPT II: 3044F
		HbA1c level Between 7.0–7.9 ICD-10-CM: E10.9, E10.10-E13.9, O24.011-O24.33, O24.811-O24.83 CPT II: 3051F
Prenatal and Postpartum Care (PPC)	Pregnant members who delivered live births on or between Oct. 8 of the year prior to the measurement year and Oct. 7 of the measurement year and received a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment in the health plan.	Prenatal Visits ICD-10-CM: Use appropriate code from "O" family; Z03.71-Z03.75, Z03.79, Z34.00-Z34.03, Z34.80-Z34.83, Z34.90-Z34.93, Z36 CPT II: 0500F, 0501F, 0502F

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