HEDIS Provider Guide: Follow-Up After Acute and Urgent Care Visits for Asthma (AAF-E)

Measure Description

The percentage of patients 5 to 64 years of age with an asthma diagnosis who had a corresponding outpatient follow-up visit within 30 days after an urgent care visit, acute inpatient discharge, observation stay discharge or emergency department (ED) visit

Documentation Tips

- Ensure the follow-up visit includes an asthma diagnosis code.
- The measure denominator may include multiple events for the same patient.
- Methodology for determining date of qualifying visit (i.e. start of 30-day period):

Type of Visit	Visit Date
Urgent Care/ED Visit	Date of visit
Urgent Care → ED Visit	Date of ED visit
Urgent Care/ED Visit → Non-acute Inpatient Stay	Date of Urgent Care or ED visit
Observation Stay/Acute Inpatient Stay	Date of discharge
Observation Stay/Acute Inpatient Stay → Non-acute Inpatient Stay	Date of Observation Stay or Acute Inpatient Stay discharge
Observation Stay (no recorded admission/discharge)	Admission date is the earliest date of service on the claim Discharge date is the last date of service on the claim
Direct Transfers (between different facilities and between inpatient and observation stays)	Date of discharge from the last transfer admission When the discharge date from the initial stay precedes by one (1) or two (2 days it is considered a direct transfer. However, if there are 3 or more days between the two admissions it is not a direct transfer and each admission is counted as separate stay.

Exclusions

- Patients in hospice
- Patients with a diagnosis of cystic fibrosis
- Non-acute inpatient stays
- ED and urgent care visits followed by admission to an acute inpatient or observation stay care setting on the date of the ED or urgent care visit, or within 30 days after the ED or urgent care visit (31 total days), regardless of diagnosis for the admission.

Using Correct Codes

Codes to Bill or 30-day Follow-up

Outpatient and Telehealth Follow-Up Visit		Asthma Diagnosis
CPT: 98000-98016, 98966-98968, 98970-98972, 98979-98981, 99202-99205, 99211-99215, 99242-99245, 99341, 99342, 99344, 99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99421-99423, 99429, 99441-99443, 99455-99458, 99470, 99483 **HCPCS:** G0071, G0402, G0438, G0439, G0463, G0544, G2010, G2012, G2250, G2251, G2252, T1015 **SNOMED:** 50357006, 77406008, 84251009, 86013001, 90526000, 185317003, 185463005, 185464004, 185465003,	With	**ICD10CM:** J45.20, J45.21, J45.22, J45.30, J45.31, J45.32, J45.40, J45.41, J45.42, J45.50, J45.51, J45.52, J45.901, J45.902, J45.909, J45.990, J45.991, J45.998 **SNOMED:** 11641008, 12428000, 18041002, 19849005, 34015007, 41553006, 55570000, 56968009, 57607007, 59786004, 63088003, 92807009, 93432008, 195949008, 195967001, 195977004, 225057002, 233678006, 233679003, 233683003, 233687002, 233688007, 233691007, 266361008, 281239006, 370218001, 370219009, 370220003, 370221004, 389145006, 404804003, 404806001, 404808000, 405944004, 407674008, 409663006, 418395004, 423889005, 424643009, 425969006, 426656000, 426979002, 427295004, 427603009, 427679007, 442025000, 445427006, 703953004, 703954005, 707444001, 707445000, 707446004, 707447008, 707511009, 707512002, 707513007,

Outpatient and Telehealth Follow-Up Visit		Asthma Diagnosis
209099002, 281036007, 314849005, 386472008, 386473003, 401267002, 439740005, 866149003, 3391000175108, 444971000124105, 456201000124103		707979007, 707980005, 707981009, 708090002, 708093000, 708094006, 708095007, 708096008, 733858005, 734904007, 734905008, 735588005, 735589002, 762521001, 782513000, 782520007, 786836003, 829976001, 1290026000, 401000119107, 901000119100, 1741000119102, 1751000119100, 5281000124103, 72301000119103, 99031000119107, 124991000119109, 125001000119103, 125011000119100, 125021000119107, 2360001000004109, 10674711000119105, 10674791000119101, 10674991000119104, 10675311000119105, 10675391000119101, 10675431000119106, 10675471000119109, 10675551000119104, 10675711000119106, 10675751000119107, 10675871000119106, 10675911000119109, 10675991000119100, 10676231000119102, 10676271000119104, 10676391000119108, 10676431000119103, 10676511000119109, 10676671000119102, 10692681000119108, 10692721000119102, 10692761000119107, 10742121000119104, 16055311000119107, 16584951000119101

Exclusions	Coding
Cystic Fibrosis	**ICD10CM:** E84.0, E84.11, E84.19, E84.8, E84.9 **SNOMED:** 86092005, 86555001, 190905008, 235978006, 427022004, 427089005, 698940002, 707418001, 707419009, 707420003, 707450006, 707536003, 707542004, 707577004, 707578009, 707766007, 716088000, 720401009, 721197001, 725052002, 762269004, 762270003, 762271004, 817966005, 1010616001, 1296527009, 1296528004

How to Improve HEDIS® Scores

- Schedule follow-up visits early. Whenever possible, schedule the follow-up appointment before emergency room or hospital discharge. Aim for visits within seven (7) to 14 days, even though the measure allows up to 30 days.
- Use telehealth strategically. Telehealth, or telephone visits, can be an effective way to ensure timely follow-up when in-person access is limited.
- Ensure proper coding is used to avoid coding asthma if you are not formally diagnosing asthma and only asthma-like symptoms were present, e.g., wheezing during a viral upper respiratory infection and acute bronchitis is not asthma.
- Educate patients about taking asthma medications correctly and the difference between long-term controller and reliever "rescue" medications.
- Consider developing a written asthma action plan with the patient to increase the patients' ability to manage their condition. Action plans should contain information about proper methods for controlling exacerbations and should cover the doses and frequencies of long-term controllers and rescue medications in response to signs and symptoms.
- If a patient reports the need for physical adaptations to their home to ensure their health, welfare, and safety, submit a community support referral form for asthma remediation services. Asthma remediation services are community support services that focus on physical changes to the home environment to enable functioning at home if acute asthma episodes may result in hospitalization or emergency service use. In the patient's record, and when completing the community support referral form, please assess and document the need for physical adaptations and the risk of the environmental hazards in the patent's surroundings to support the referral for asthma remediation services.