



2026 Coding for Success: Understanding AIS-E, CIS-E, IMA-E, PRS-E, & LSC HEDIS® Measures

Presenters: Holly Conk, DHA, MBA-HM, BSN,
RN

Vice President, Quality and RISK Adjustment

Jennifer Howland, MSHIA, RHIA, CPC
Director, Quality Improvement

Julie Olsen, MBA, RN, CPC
Manager, HEDIS® Operations



Member Success Story

"I want to take the time and share my sincerest gratitude to you and Oklahoma Complete Health for making my healthcare journey one that has only continued to get better and better.

I remember our first meeting on the phone and the circumstances I was living under and health conditions that were barriers limiting my independence.

As we fast forward to today, I'm so excited to share with you a photo of me and Remington enjoying a nice walk after church in my new power wheelchair that you supported and advocated for me.

It didn't take long before I was hitting the pavement and exploring the neighborhood. Thank you from the bottom of my heart. You've truly changed my life." Member, John E.



2026 Pay-for-Performance (P4P) PCP – SoonerSelect Measures

Measure	50th Percentile	50th Percentile Payout	75th Percentile	75th Percentile Payout	90th Percentile	90th Percentile Payout
Glycemic Status Assessment for Patients with Diabetes (GSD) <8% (18-75 yrs)	56.69%	\$40.00	63.75%	\$80.00	74.62%	\$100.00
Controlling High Blood Pressure (CBP) (18-75 yrs)	63.87%	\$40.00	70.56%	\$80.00	74.62%	\$100.00
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) (3-17 yrs)	55.41%	\$40.00	61.47%	\$80.00	67.63%	\$100.00
Childhood Immunization Status (CIS) Combination Three (3) (0-2yrs)	62.04%	\$40.00	67.40%	\$80.00	69.76%	\$100.00
Immunizations for Adolescents (IMA) Combination Two (2) (9-13 yrs)	34.30%	\$40.00	41.61%	\$80.00	48.66%	\$100.00
Well-Child Visits in the First Thirty (30) Months of Life (W30) (First 15 Mo)	46.98%	\$40.00	57.15%	\$80.00	63.29%	\$100.00
Well-Child Visits in the First Thirty (30) Months of Life (W30) (15 - 30 Mo)	59.69%	\$40.00	66.79%	\$80.00	71.93%	\$100.00
Children and Adolescent Well-Care Visit (WCV) (3 -21 yrs)	55.41%	\$40.00		N/A		N/A

Measure	Payout
Annual Preventive Visit (APV) 18 – 75 years old	\$ 40.00

2026 Pay-for-Performance (P4P) PCP – Children’s Specialty Program Measures

Measure	50th Percentile	50th Percentile Payout	75th Percentile	75th Percentile Payout	90th Percentile	90th Percentile Payout
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) (3-17 yrs)	55.41%	\$40.00	61.47%	\$80.00	67.63%	\$100.00
Childhood Immunization Status (CIS) Combination Three 3) (0-2yrs)	62.04%	\$40.00	67.40%	\$80.00	69.76%	\$100.00
Immunizations for Adolescents (IMA) Combination Two (2) (9-13 yrs)	34.30%	\$40.00	41.61%	\$80.00	48.66%	\$100.00
Well-Child Visits in the First Thirty (30) Months of Life (W30) (First 15 Mo)	46.98%	\$40.00	57.15%	\$80.00	63.29%	\$100.00
Well-Child Visits in the First Thirty (30) Months of Life (W30) (15 - 30 Mo)	59.69%	\$40.00	66.79%	\$80.00	71.93%	\$100.00
Children and Adolescent Well-Care Visit (WCV) (3 -21 yrs)	55.41%	\$40.00		N/A		N/A

Measure	Payout
Annual Preventive Visit (APV) 18-26 yrs	\$ 40.00

New 2026 Pay-for-Performance (P4P) PCP and OB/GYN – SoonerSelect and Children's Specialty Program Measures

Measure	50th Percentile	50th Percentile Payout	75th Percentile	75th Percentile Payout	90th Percentile	90th Percentile Payout
Prenatal and Postpartum Care (PPC) – Timeliness of Prenatal Care	77.83%	\$40.00	84.67%	\$80.00	88.85%	\$100.00
Prenatal and Postpartum Care (PPC) – Timeliness of Postpartum Care	75.99%	\$40.00	81.92%	\$80.00	86.10%	\$100.00

New 2026 Pay-for-Performance (P4P) Behavioral Health Provider – SoonerSelect and Children's Specialty Program Measures

Measure	50th Percentile	50th Percentile Payout	75th Percentile	75th Percentile Payout	90th Percentile	90th Percentile Payout
Follow-Up After Emergency Department Visit for Mental Illness: Ages 6 yrs and older (FUM) 7 Day	27.78%	\$40.00	36.64%	\$80.00	46.72%	\$100.00
Follow-Up After Emergency Department Visit for Mental Illness: Ages 6 yrs and older (FUM) 30 Day	56.44%	\$40.00	67.18%	\$80.00	77.60%	\$100.00
Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication (ADD-CH)	43.54%	\$40.00	54.35%	\$80.00	60.22%	\$100.00
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH)	49.74%	\$40.00	58.97%	\$80.00	66.60%	\$100.00
Follow-Up After Hospitalization for Mental Illness: Ages 6 to 17 (FUH-CH) 7 Day	26.98%	\$40.00	35.33%	\$80.00	45.54%	\$100.00
Follow-Up After Hospitalization for Mental Illness: Ages 6 to 17 (FUH-CH) 30 Day	52.74%	\$40.00	52.91%	\$80.00	59.86%	\$100.00

2026 Pay-for-Performance (P4P) – Ambetter Measures

2026 Measure List	Measure Incentive	Target 1 Pays 75% of Incentive	Target 2 Pays 100% of Incentive
Breast Cancer Screening (BCS-E)	\$25.00	73.20%	77.10%
Cervical Cancer Screening (CCS-E)	\$25.00	47.30%	57.50%
Child and Adolescent Well-Care Visits (WCV)	\$25.00	49.50%	60.30%
Chlamydia Screening in Women (CHL)	\$25.00	45.70%	52.80%
Colorectal Cancer Screening (COL-E)	\$25.00	54.10%	60.80%
Blood Pressure Control for Patients with Hypertension (BPC-E)	\$25.00	68.10%	73.80%
Eye Exam for Patients with Diabetes (EED)	\$25.00	44.60%	53.30%
Glycemic Status Assessment for Patients with Diabetes (<9) (GSD)	\$25.00	73.50%	79.10%
Kidney Health Evaluation for Patients with Diabetes (KED)	\$25.00	49.90%	56.90%
Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)*	\$25.00	42.30%	50.40%

2026 Partnership for Quality (P4Q) – Wellcare Measures

Measure	P4Q Amount per Member	P4Q Amount per Clinical Priority Member	Combined P4Q and Clinical Priority Member Earning Potential	Common Ways to Close the Gap
Annual Preventive Visit (APV)	\$25	\$25	\$50	Annual Wellness Visit and/or Routine Physical Exam
Breast Cancer Screening (BCS)	\$50	\$10	\$60	Mammogram
Controlling High Blood Pressure (CBP)	\$100	\$25	\$125	Documented blood pressure reading
Colorectal Cancer Screen (COL)	\$50	\$10	\$60	Fit kit, colonoscopy, CT colonography
Diabetes – Dilated Eye Exam (EED)	\$25	\$10	\$35	Comprehensive eye exam or retinal screening with proper diagnosis codes

Measure	P4Q Amount per Member	P4Q Amount per Clinical Priority Member	Combined P4Q and Clinical Priority Member Earning Potential	Common Ways to Close the Gap
Diabetes HbA1C ≤ 9 (GSD)	\$100	\$25	\$125	Blood test
Kidney Health Evaluation for Patients with Diabetes (KED)	\$50	\$10	\$60	Urine screening and blood test
Medication Adherence – Blood Pressure Medications	\$35	N/A	\$35	Medication regimen
Medication Adherence – Diabetes Medications	\$35	N/A	\$35	Medication regimen
Medication Adherence – Statins	\$35	N/A	\$35	Medication regimen
Osteoporosis Management in Women with Fracture (OMW)	\$50	\$10	\$60	BMD, osteoporosis medication therapy or long-acting osteoporosis medications
Statin Therapy for Patients with CVD (SPC)	\$35	\$10	\$45	Medication regimen
Statin Use in Persons with Diabetes (SUPD)	\$35	\$10	\$45	Medication regimen
Medication Reconciliation Post Discharge (TRC)	\$50	\$10	\$60	Medication reconciliation encounter/intervention: 99483, CPT II Code 1111F



Clinical Priority Members

Clinical Priority Members may require a greater level of medical attention due to chronic illnesses, disabilities, age, or other factors that necessitate the need for more frequent provider visits, specialized treatments and chronic care support. These members will be indicated in Gap in Care Reports beginning in March 2026. For questions, please reach out to your Provider Representative.

Key Components & Proper Coding for AIS-E HEDIS® Measure

Understanding the AIS-E HEDIS® Measure & Proper Coding

Measure Name:

- AIS-E – Adult Immunization Status

Target Population:

- Members aged 19 and older during the measurement year (MY)

Measure Requirement:

- ✓ Up to date on recommended routine vaccines for:
 - Influenza: One vaccination between July 1, prior year – June 30, MY
 - Td/Tdap: One vaccination between January 1, 9 years prior to December 31, MY
 - Zoster: Two vaccinations between October 20, 2017 – December 31, MY (only aged 50+)
 - Pneumococcal: One vaccination between on/after member's 19th birthday to December 31, MY (only aged 65+)
 - Hepatitis B: 3 doses on/before 19th birthday (only aged 19-59)
 - COVID-19: One dose on between July 1, prior year – June 30, MY (only aged 65+)

Why It Matters:

- Provides protection for at-risk populations with chronic illnesses or compromised immune systems

Understanding the AIS-E HEDIS® Measure & Proper Coding*

Coding Requirements (Must Be Documented & Coded**):

CPT Codes:

- 90714 – Td
- 90715 – Tdap
- 90750 – Zoster
- 90740, 90744, 90746, 90747, 90759, 90739, or 90743 – Hepatitis B
- 90630, 90653, 90654, 90656, 90658, 90661, 90662, 90673, 90674, 90682, 90686, 90688, 90689, 90694, or 90756 – Influenza
- 90670, 90671, 90677, or 90732 – Pneumococcal
- 91304, 91320, or 91322 – COVID-19

**Codes listed are for informational purposes related to quality reporting and should not be used as a substitute for comprehensive billing and coding guidance.*

***Codes subject to change.*

AIS-E Medical Record Review Example

The claim and record shown below are an example for training purposes. For 2026, claims with service dates depends on the vaccine type look-back period.

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E) ICD Ind. 0

A. E119 B. R109 C. **Z23** Encounter for immunization D. F321
 E. N898 F. G. H.
 I. J. K. L.

3 N419515090452 ML 0.5

MM	DD	YY	MM	DD	YY	ICD	DIAGNOSIS POINTER
10	29	25	11	90656		Flu Vaccine	C

Chief Complaint

Patient presents with

- Pain Abdominal

Patient states she is having menstrual like cramps

Flu screening checklist was reviewed with the patient. VIS was given prior to administration.

ASSESSMENT AND PLAN

Type 2 diabetes mellitus, controlled (HCC)

New onset.

Diabetes is newly identified.

Requested: Susan N. PA at 10/29/2025 AM

Status: Signed

Updated on: 10/29/2025 AM

Name	Date	Status	Dose
INFLUENZA VACCINE TRIV	10/29/2025	Given	0.5 mL

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E) ICD Ind. 0

A. Z01411 B. **Z23** Encounter for immunization C. A630 D. N898
 E. F. G. H.
 I. J. K. L.

24. A. DATE(S) OF SERVICE	B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES	E. DIAGNOSIS POINTER
From To	EMG	(Explain Unusual Circumstances)		
MM DD YY MM DD YY		CPT/HCPCS MODIFIER		
1 N400005200010 ML 0.5	11	90677	Pneumococcal Vaccine	B
3 N458160082152 ML 1	11	90746	HepB Vaccine	B
4 N458160084252 ML 0.5	11	90715	Tdap Vaccine	B
1 N458160082311 ML 0.5	11	90750	Zoster Vaccine	B

Chief Complaint

Patient presents with

- Results

Patient presents to clinic today to go over lab results.

ASSESSMENT AND PLAN

Abnormal glucose

A1c is 6.4, will recheck again today.

Need for Tdap vaccination	Z23	TDAP VACCINE >7YO IM
Need for pneumococcal vaccination	Z23	PNEUMOCOCCAL PCV20 CONJ VAC IM
Need for zoster vaccination	Z23	ZOSTER HZV VACC RECOMBINANT INJ IM
Need for hepatitis B vaccination	Z23	HEP B VACC ADULT 3 DOSE IM

Requested: Susan N. PA at 6/25/2025 PM

Status: Signed

Updated on: 6/25/2025 PM

Name	Date	Status	Dose
TDAP (7yrs+)	6/25/2025	Given	0.5 mL

Updated on: 6/25/2025 PM

Name	Date	Status	Dose
PNEUMOCOCCAL PCV20 CONJ VAC	6/25/2025	Given	0.5 mL

Updated on: 6/25/2025 PM

Name	Date	Status
Zoster Hzv	6/25/2025	Given

Updated on: 6/25/2025 PM

Name	Date	Status	Dose
HEP B	6/25/2025	Given	1 mL

AIS-E Medical Record Example - Best Practice Observed

AIS-E HEDIS® Measure Components:

Flu vaccine documented

- Influenza vaccine administered on 10/29/25
- Tdap, Hep B, Zoster, and Pneumococcal Vaccine administered on 6/25/25

Key Finding:

All vaccines correctly billed using CPT codes:

- 90656 – Influenza virus vaccine
- 90677 – Pneumococcal vaccine
- 90746 – HepB vaccine
- 90715 – Tdap vaccine
- 90750 – Zoster vaccine

Best Practice Observed:

 Flu vaccine for AIS-E HEDIS® was properly documented and submitted with the correct CPT codes on the claim, supporting AIS-E HEDIS® compliance and timely gap closure. Continue monitoring and documenting all required AIS-E components to ensure full compliance.

Understanding the AIS-E HEDIS® Measure & Proper Coding

Coding Tips:

1. Hep B immunization added to the AIS-E measure for 2025 and COVID19 added for 2026.
2. Use the correct CPT codes for each vaccine based on the product administered, for example:
 - **90686:** Flu vaccine
 - **90715:** Tdap
 - **90750:** Zoster
 - **90671:** Pneumococcal
 - **90739:** Hepatitis B
 - **91304:** COVID19
3. Z23 diagnosis code is required.
4. Report all vaccines administered to the immunization registry.
5. Timing Matters – Follow the Specific Date Ranges for each vaccine.
6. Schedule appointments within immunization timeframes.

Key Components & Proper Coding for CIS-E HEDIS® Measure

Understanding the CIS-E HEDIS® Measure & Proper Coding

Measure Name:

- CIS -E– Childhood Immunization Status

Target Population:

- Members who turn 2 years of age in the measurement year

Measure Requirements:

✓ Complete the following vaccines by member's 2nd birthday:

- 4 Dtap
- 3 HiB
- 3 IPV
- 3 HepB
- 1 MMR
- 1 Varicella
- 1 HepA
- 4 PCV
- 2 or 3 Rotavirus
- 2 Flu

Why It Matters:

- Childhood immunizations help prevent serious illnesses such as polio, tetanus and hepatitis.
- Impacts **HEDIS® compliance, quality reporting, P4P incentives, and member incentives.**

Understanding the CIS-E HEDIS® Measure & Proper Coding*

Coding Requirements (Must Be Documented & Coded**):

ICD 10 Codes:

- 90697, 90698, 90700, or 90723 – DtaP
- 90644, 90647, 90648, 90697, 90698, or 90748 – HiB
- 90697, 90723, 90740, 90744, 90747, or 90748 – HepB
- 90697, 90698, 90713, or 90723 – IPV
- 90707 or 90710 – Measles, mumps and rubella (MMR)
- 90670, 90671, or 90677 - PCV (pneumococcal conjugate)
- 90710 or 90716 – VZV (varicella zoster virus)
- 90633 – HepA (hepatitis A)
- 90655, 90657, 90660, 90661, 90672, 90673, 90674, 90685–90689, or 90756 – Influenza
- 90681 or 90680 – Rotavirus

**Codes listed are for informational purposes related to quality reporting and should not be used as a substitute for comprehensive billing and coding guidance.*

***Codes subject to change.*

CIS-E Medical Record Example

The claim shown below is an example for training purposes. For 2026, claims will be counted for CIS-E based on the child's age at the time of visit.

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E) ICD Ind. 0

A Z00129 B Z23 **Encounter for immunization** D. H.

5 ML 0.5
01 23 26 11 90661 **Flu** SL B

6 ML 0.5
01 23 26 11 90633 **HepA** SL B

1 0.5
01 23 26 11 90700 **Dtap** SL B

Subjective

_____ is a 18 m.o. _____ who is brought in for this well child visit.

Screening

Immunizations are up-to-date.

Assessment/Plan

_____ was seen today for well child.

Other orders

- Hepatitis A vaccine pediatric / adolescent 2 dose IM
- DTaP vaccine less than 7yo IM
- Flu vaccine, split virus, trivalent, PF, IM

Electronically signed by _____ MD at 1/23/2026 _____ AM

Updated on: 1/23/2026 _____ AM			
Name	Date	Status	Dose
DTaP	1/23/2026	Given	0.5 mL

Updated on: 1/23/2026 _____ AM			
Name	Date	Status	Dose
Flu Vaccine,	1/23/2026	Given	0.5 mL

Updated on: 1/23/2026 _____ AM			
Name	Date	Status	Dose
Hep A, 2 Dose	1/23/2026	Given	0.5 mL

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E) ICD Ind. 0

A Z00129 B Z23 **Encounter for immunization** D. H.

4 ML 0.5
10 29 25 11 90716 **VZV** SL B

5 ML 0.5
10 29 25 11 90707 **MMR** SL B

Subjective

_____ is a 15 m.o. _____ who is brought in for this well child visit.

History reviewed. No pertinent past medical history.

Assessment/Plan

_____ was seen today for well child.

Other orders

- Varicella vaccine subcutaneous
- MMR vaccine subcutaneous

Electronically signed by _____ MD at 10/29/2025 _____ PM

Updated on: 10/29/2025 _____ PM			
Name	Date	Status	Dose
MMR	10/29/2025	Given	0.5 mL

Updated on: 10/29/2025 _____ PM			
Name	Date	Status	Dose
Varicella	10/29/2025	Given	0.5 mL

CIS-E Medical Record Example - Best Practice Observed

CIS-E HEDIS® Measure Components:

- ✓ **Vaccines clearly documented as administered:**
 - Dtap, Flu, and HepA vaccines administered on 1/26/26
 - MMR and VZV vaccines administered on 10/29/25
- ✓ **Key Finding: Vaccines correctly billed using CPT codes:**
 - 90661 – Flu vaccine
 - 90633 – Hepatitis A vaccine
 - 90700 – Dtap vaccine
 - 90716– Varicella (chickenpox) virus vaccine Measles
 - 90707 – Measles, Mumps, and Rubella (MMR) vaccine
 - Z23 – Encounter for immunization

Best Practice Observed:

 Vaccines were properly documented and submitted with the correct CPT codes on the claim, supporting CIS-E HEDIS® compliance and timely gap closure. Continue monitoring and documenting all required CIS-E components to ensure full compliance.

Understanding the CIS-E HEDIS® Measure & Proper Coding

Coding Tips:

1. Document **both** the name of the vaccine and the date it was administered in the medical record.
2. Remember to include the appropriate CPT code on the claim.
3. Z23 diagnosis code is required.
4. Report all vaccines administered to the immunization registry.
5. Ensure patient vaccination record is complete and accurate even if your office did not provide the vaccine.
6. Vaccines must be administered and documented before the child turns 2.
7. Assess immunization status at every visit—sick, well-child, follow-up, etc.
8. If a vaccine was given but not billed, submit supplemental data to the health plan.
9. Avoid using lab-only codes (e.g., POS code 81), as they don't count toward the measure.

Key Components & Proper Coding for IMA-E HEDIS® Measure

Understanding the IMA-E HEDIS® Measure & Proper Coding

Measure Name:

- IMA-E – Immunizations For Adolescents

Target Population:

- Members who turn 13 years of age during the measurement year

Measure Requirements:

- ✓ Tdap (1 dose on/between 10th and 13th birthday)
- ✓ Meningococcal (1 dose on/between 10th and 13th birthday)
- ✓ HPV (2 or 3 dose on/between 9th and 13th birthday)

Why It Matters:

- Receiving recommended vaccinations is the best defense against vaccine-preventable diseases, including meningococcal meningitis, tetanus, diphtheria, pertusis (whooping cough), and human papillomavirus.
- Impacts **HEDIS® compliance, quality reporting, P4P incentives, and member incentives.**

Understanding the IMA-E HEDIS® Measure & Proper Coding*

Coding Requirements (Must Be Documented & Coded**):

CPT Codes:

- 90715 – tetanus, diphtheria toxoids and acellular pertussis vaccine [Tdap]
- 90619, 90623, 90733 or 90734 – Meningococcal vaccine
- 90649, 90650, or 90651 – Human Papillomavirus vaccine

**Codes listed are for informational purposes related to quality reporting and should not be used as a substitute for comprehensive billing and coding guidance.*

***Codes subject to change.*

IMA-E Medical Record Example

The claim shown below is an example from 2025/6 for training purposes. For 2026, claims will be counted for IMA-E based on the child's age at the time of visit.

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E)										ICD Ind.	0	
A	Z00129			B	Z23			C	H52209		D	J302
E				F				G			H	
I				J				K			L	
24. A. DATE(S) OF SERVICE From To B. PLACE OF SERVICE C. EMG D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) E. DIAGNOSIS POINTER												
1	MM	DD	YY	MM	DD	YY			CPT/HCPCS	MODIFIER		
1	01	21	26				11		99394	25		ACDB
2	01	21	26				11		90656			B
3	01	21	26				11		90651			B

Subjective

_____ is a 12 y.o. _____ who is brought in by parent for this well child visit.

Assessment/Plan

Healthy 12 y.o. _____ adolescent.

1. Growth: normal
2. Development: appropriate for age.
3. Immunizations today: age appropriate vaccines ordered today
4. Anticipatory guidance discussed.

Electronically signed by _____ NP at 1/21/2026 _____ PM

Updated on: 1/21/2026 _____ PM			
Name	Date	Status	Dose
HPV 9-Valent	1/21/2026	Given	0.5 mL

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E)										ICD Ind.	0	
A	Z00129			B	Z23			C	H52209		D	J302
E				F				G			H	
I				J				K			L	
24. A. DATE(S) OF SERVICE From To B. PLACE OF SERVICE C. EMG D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) E. DIAGNOSIS POINTER												
1	MM	DD	YY	MM	DD	YY			CPT/HCPCS	MODIFIER		
1	01	22	25				11		90651	HPV	JZ	B
5	01	22	25				11		90619	MCV	JZ	B
6	01	22	25				11		90715	Tdap	JZ	B

Subjective

_____ is a 11 y.o. _____ who is brought in by parent for this well child visit.

Assessment/Plan

Healthy 11 y.o. _____ child.

1. Growth: normal
2. Development: appropriate for age.
3. Immunizations today: age appropriate vaccines ordered today
4. Anticipatory guidance discussed.

Electronically signed by _____ NP at 1/22/2025 _____ PM

Updated on: 1/22/2025 _____ PM			
Name	Date	Status	Dose
HPV 9-Valent	1/22/2025	Given	0.5 mL

Updated on: 1/22/2025 _____ PM			
Name	Date	Status	Dose
Meningococcal	1/22/2025	Given	0.5 mL

Updated on: 1/22/2025 _____ PM			
Name	Date	Status	Dose
Tdap	1/22/2025	Given	0.5 mL

IMA-E Medical Record Example – Best Practice Observed

IMA-E HEDIS® Measure Components:

Vaccines clearly documented as administered:

- Tdap – received at age 11
- Meningococcal – received at age 11
- HPV – Received one dose at age 11 and 2nd dose at age 12 with minimum 146 days between 1st and 2nd dose

Key Finding: Vaccines were accurately billed using appropriate CPT codes.:

- 90715 – Tdap vaccine
- 90734 – Meningococcal vaccine
- 90651 – Human Papillomavirus vaccine

Best Practice Observed:

 Vaccines were properly documented and submitted with the correct CPT codes on the claim, supporting IMA-E HEDIS® compliance and timely gap closure. Member fully compliant and the care gap is closed by claims with provider earning P4P incentive.

Understanding the IMA-E HEDIS® Measure & Proper Coding

Coding Tips:

1. Remember to include the appropriate CPT code on the claim.
2. Document **both** the name of the vaccine & the date it was administered in the medical record.
3. At each appointment, review immunization records and encourage the opportunity to catch up on missing immunizations.
4. Document all parental refusals of vaccine administration at the time of their occurrence. This does not make the member compliant for the measure.
5. Report all vaccines administered to the immunization registry.
6. Vaccines must be administered and documented on or before the adolescent turns 13.

Key Components & Proper Coding for PRS-E HEDIS® Measure

Understanding the PRS-E HEDIS® Measure & Proper Coding

Measure Name:

- PRS-E – Prenatal Immunization Status

Target Population:

- The percentage of members with deliveries during the measurement year who have received the 2 recommended immunizations.

Measure Requirements:

- ✓ Influenza (on or between July 1 of the year prior to the measurement year and the delivery date)
- ✓ Tdap (received during the pregnancy – including the date of delivery)

Why It Matters:

- Changes in the immune system & physiology put pregnant women at higher risk for hospitalization & death from influenza than other populations.
- Transfer of antibodies from an immunized mother to her fetus is the primary means of protecting infants from influenza & pertussis after birth.
- Impacts **HEDIS® compliance, quality reporting.**

Understanding the PRS-E HEDIS® Measure & Proper Coding*

Coding Requirements (Must Be Documented & Coded**):

CPT Codes:

- 90715 – Tdap
- 90653, 90656, 90658, 90661, 90662, 90673, 90674, 90682, 90686, 90688, 90689, 90694 or 90756 – Influenza

**Codes listed are for informational purposes related to quality reporting and should not be used as a substitute for comprehensive billing and coding guidance.*

***Codes subject to change*

PRs-E Medical Record Example

The claim and record shown below are an example for training purposes. For 2026, claims with service dates in 2025 and 2026 will be counted for PRs-E based on the date of visit for the vaccine and measure.

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E)										ICD Ind.				
A	B	C	D	E	F	G	H	I	J	K	L			
Z23	00993											0		
Encounter for immunization														
24. A. DATE(S) OF SERVICE										B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS	MODIFIER	E. DIAGNOSIS POINTER
MM	DD	YY	MM	DD	YY									
10	21	25				11		90715	Tdap					B
10	21	25				11		90656	Flu					A
10	21	25				11		90471						A
10	21	25				11		90472						A

RETURN OB VISIT

Chief Complaint

Patient presents with

- Prenatal Care

HPI:

is a 25 year old G P: Body mass index is 32.01 kg/m². woman at w d

is without complaint. Denies vaginal bleeding, leakage of fluid, or contractions. Reports normal fetal movement.

OBJECTIVE:

Vitals:

BP 106/56 | Ht 1.575 m (5' 2") | Wt 79.4 kg (175 lb)

Fundal Height (cm): cm

Fetal Heart Rate:

Movement: Present

ASSESSMENT/PLAN: Estimated Date of Delivery: //26.

Supervision of high risk pregnancy in third trimester (HCC)

ROB at 28w6d by L=15

- NOB Labs: O+/Abs-, 11.9/36.2/387, A1c %

- Pap (12/01/2023): NILM

- NIPT LR, XY

- s/p 3TM labs

- Flu and Tdap today; RSV at 32-36 weeks

- 3-hour GTT ordered

Return to clinic in 2 weeks

Orders Placed This Encounter

- TDAP VACCINE >7YO IM (ADACEL)
- INFLUENZA VACCINE, TRIV. (FLUZONE; FLULAVAL; FLUARIX; AFLURIA TRIVALENT; 6MO+), 0.5 ML (IIV3)
- GTT 3 HR (100G) GESTATIONAL DIAGNOSTIC

Electronically Signed by MD on 10/21/2025 AM

Updated on: 10/21/2025 AM			
Name	Date	Status	Dose
TDAP (7yrs+)	10/21/2025	Given	0.5 mL

Updated on: 10/21/2025 AM			
Name	Date	Status	Dose
INFLUENZA VACCINE, TRIV.	10/21/2025	Given	0.5 mL

PRS-E Medical Record Example – Best Practice Observed

PRS-E HEDIS® Measure Components:

Vaccine clearly documented as administered:

- Tdap received during pregnancy
- Influenza received on or between July 1 of the year prior to the measurement year and the delivery date

Key Finding: Vaccine was accurately billed using appropriate CPT codes:

- 90715 – Tdap vaccine
- 90656 – Influenza virus vaccine

Best Practice Observed:

 The influenza vaccines was properly documented and submitted with the correct CPT code on the claim, supporting PRS-E HEDIS® compliance and timely gap closure

- The immunizations were clinically documented and accurately coded on the claim, successfully closing the PRS-E care gap

Understanding the PRS-E HEDIS® Measure & Proper Coding

Coding/Documentation Tips:

1. Use CPT codes* (e.g., 90715 for Tdap, 90686 for Influenza) or CVX codes in EHRs to ensure proper capture
2. Z23 diagnosis code is required
3. Offer vaccines during routine prenatal visits or upon admission for delivery.
4. Vaccines must be administered and documented during the pregnancy window—pre-pregnancy or postpartum doses do not count.
5. Report all immunizations to the state immunization registry.
6. Use prenatal visit templates that prompt for immunization status.

**Codes listed are for informational purposes related to quality reporting and should not be used as a substitute for comprehensive billing and coding guidance.*

Key Components & Proper Coding for LSC HEDIS® Measure

Understanding the LSC HEDIS® Measure & Proper Coding

Measure Name:

- LSC – Lead Screening in Children

Target Population:

- Members turning 2 years of age during the measurement year.

Measure Requirements:

- ✓ Have 1 or more capillary or venous lead blood tests on or before member's 2nd birthday
- ✓ Must document both the date & the result of screening

Why It Matters:

- Screening for lead is the easiest way to detect an abnormal blood lead level in children.
- The CDC estimates 500,000 US children suffer from levels of lead above the reference level.
- If not found early, exposure to lead & high blood lead levels can lead to irrevocable effects on a child's physical & mental health.
- Impacts **HEDIS® compliance, quality reporting, and member incentives.**

Understanding the LSC HEDIS® Measure & Proper Coding*

Coding Requirements (Must Be Documented & Coded**):

CPT Code:

- 83655 – Lead test

**Codes listed are for informational purposes related to quality reporting and should not be used as a substitute for comprehensive billing and coding guidance.*

***Codes subject to change*

LSC Medical Record Example

The claim and record shown below are an example for training purposes. For 2026, claims with service dates in 2025 and 2026 will be counted for LSC based on the child's age at the time visit.

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E)										ICD Ind.	
A	B	C	D	E	F	G	H	I	J	K	L
Z00129	Z23	Z7189									

24. A.	DATE(S) OF SERVICE			B.	C.	D. PROCEDURES, SERVICES, OR SUPPLIES		E.
	From	To		RACE OF SERVICE	EMG	(Explain Unusual Circumstances)		DIAGNOSIS POINTER
	MM	DD	YY			CPT/HCPCS	MODIFIER	
1	PREV VISIT EST AGE 1-4							
	01	06	26	11		99392	25	ABC
2	ASQ AGES & STAGES QUESTIONNAIRE; 9, 18, 24 MONTHS							
	01	06	26	11		96110		A
3	LEAD TEST							
	01	06	26	11		83655	QW	A
4	HEMOGLOBIN;BLOOD COUNT (HGB)							
	01	06	26	11		85018	QW	A
5	COLLECTION OF CAPILLARY BLOOD SPECIMEN (EG, FINGER)							
	01	06	26	11		36416		A
6								

History Of Present Illness

The patient, [REDACTED] is a 12 month old [REDACTED] mother for a well child visit.

Interval History & Concerns:

The interval medical history is unremarkable.

No chronic illnesses are reported.

Development:

The child has achieved all developmental 12 month milestones including: SEE SCANNED ASQ. [REDACTED] is cared for by [REDACTED] mother at home.

Risk Factors:

The child is reported to sit in a car seat during car travel at all times without exceptions. There is no family history of elevated cholesterol levels or myocardial infarction before the age of 50. The child was born in the US, and there is no history of a family member with active TB or a chronic cough.

Date	Time	BP	Position	Site	Cuff L/R Size	HR	RR	TEMP (F)	WT (kg)	HT (cm)	BMI kg/m ²	BSA m ²	O2 Sat
01/06/2026	[REDACTED] PM					126 - R	32	99	9.74	74	17.79	0.45	98 %

Assessment

- (1) Well Child Exam
Encounter for routine child health examination without abnormal findings V20.2/Z00.129
Encounter for immunization V20.2/Z23
- (2) Vaccine Administration V03.89/Z23
- (3) Counseling on Injury Prevention V65.43/Z71.89

Plan

Orders

- Immunization Administration, Initial Injection (VFC) (90471) - V03.89/Z23 - 01/06/2026 - Hold lab results until reviewed :No
- Immunization Administration, Additional Injection (VFC) (90472) - V03.89/Z23 - 01/06/2026 - Hold lab results until reviewed :No
- Varicella (VFC) (VFCVL8) - V03.89/Z23 - 01/06/2026 - Hold lab results until reviewed :No
- Hep A (VFC) (VFCV100) - V03.89/Z23 - 01/06/2026 - Hold lab results until reviewed :No
- MMR PRIORIX (VFC) (VFCVL7A) - V03.89/Z23 - 01/06/2026 - Hold lab results until reviewed :No
- ASQ (9611001) - V20.2/Z00.129 - 01/06/2026 - Hold lab results until reviewed :No

Results

In Office Procedures

Lab: In Office

Lead Blood Fingertick (36416, 83655-QW)
 ■ Lead Level: 3.3 mcg/dL

Lead Blood Fingertick (Results)

■ Lead Level: 3.3 mcg/dL

Electronically Signed by: [REDACTED] -Author on January 6, 2026 [REDACTED] PM

LSC Medical Record Example – Best Practice Observed

LSC HEDIS® Measure Components:

- ✓ Capillary blood lead test completed on or before the child turned 2 years of age.

Key Finding: Lead test was accurately billed using appropriate CPT code:

- ✓ 83655 – Lead
- ✓ 36416 – Collection of capillary blood specimen (e.g., finger, heel, ear stick)

Best Practice Observed:

-  The lead blood test was properly documented and submitted with the correct CPT code on the claim, supporting LSC HEDIS® compliance and timely gap closure

Understanding the LSC HEDIS® Measure & Proper Coding

Coding/Documentation Tips:

1. Remember to include the appropriate CPT code on the claim.
2. Assessment alone does not meet criteria for this measure – blood test must be completed.
3. Unknown is not a result/finding.
4. Labcorp offers no charge filter paper collection kits that uses only 2 drops of blood to complete in office with CPT code 36416 (collection of capillary blood specimen).

Understanding the LSC HEDIS® Measure & Proper Coding

- Filter paper lead screening supplies can be ordered from Labcorp at no cost to you.
- These pre-assembled collection kits are available by request and include all collection supplies and shipment materials.
- There are no initiation fees or contract requirements.
- To order call Labcorp rep Joe Huffer at 651-260-9343, or email Hufferj@labcorp.com
- Any questions contact your Provider Representative.



CLOSING GAPS IN CARE

Filter paper lead screening: Increase compliance with in-office collections

The US Centers for Disease Control and Prevention (CDC) estimates that 500,000 US children suffer from levels of lead above the reference level at which public action is recommended.¹ Lead poisoning may affect children of all socioeconomic levels² and may occur without obvious symptoms. An in-office finger stick collection may help offices increase their lead poisoning screening rates.

Labcorp offers a comprehensive set of testing options for lead exposure.

The filter paper lead screening service is an example of Labcorp's commitment to improving health and improving lives. The convenient, in-office screening can aid in getting more patients appropriately screened. It is a perfect complement to Labcorp's traditional venous collections.

Simple

- Screenings may be performed with two drops of blood from a finger stick during a routine office visit
- May be less invasive and traumatic for a child than a venous collection
- No spinning, refrigeration, or phlebotomist required
- Reports are available via fax, secure website or EMR

Accurate

- State-of-the-art technology assures timely and accurate results
- Samples are stable for up to 6 months
- Labcorp meets state reporting requirements for lead screening results

Cost-effective

- Collection supplies and specimen shipment are included
- Labcorp files claims with Medicaid and most major insurance companies.
- No equipment to purchase or maintain

Test Name	Test No.	Supply No.
Lead, Blood, Filter paper	791280	107973

References
1. Centers for Disease Control and Prevention. Lead. Located at <http://www.cdc.gov/lead/>. Accessed April 9, 2013.
2. Centers for Disease Control and Prevention. Childhood Lead Poisoning Lead and Your Health. <http://nphhacking.cdc.gov/HowCommunityDesignAffectsChildhoodLeadPoisoning.action>. Page created April 17, 2012. Accessed April 9, 2013.



Summary & Resources

Summary Coding for Success: AIS-E, CIS-E, IMA-E, PRS-E, & LSC

Key Takeaways:

1. Documentation & Coding Essentials

- AIS-E: (Adult Immunization Status): Code all adult vaccines (e.g., flu, Tdap, pneumococcal) using appropriate CPT and diagnosis codes to ensure measure compliance.
- CIS-E: (Childhood Immunization Status) Document and code all required childhood vaccines on or before age 2—coding ensures credit even if chart notes are complete.
- IMA-E: (Immunizations For Adolescents) Administer and code Tdap, MCV, and HPV vaccines on or before age 13; use appropriate CPT and diagnosis codes for full capture.
- PRS-E: (Prenatal Immunization Status) Code all prenatal vaccines (flu and Tdap) with CPT and diagnosis codes to ensure measure compliance.
- LSC: (Lead Screening in Children) Ensure one or more lead screenings are completed and coded by the child's second birthday.

2. For P4P incentive, documentation alone isn't enough, it must be coded properly.*

**OCH reviews less than 10% of all charts. That means if you're not coding it, you're not getting credit – even if it's documented in the chart.*

Quick Reference Guide HEDIS®

Quick Reference
Guide HEDIS® with
codes are available
on Oklahoma
Complete Health
Website:

<https://www.oklahomacompletehealth.com/providers/resources/forms-resources.html>

Quick Reference Guide HEDIS®

FOR MORE INFORMATION, VISIT [NCQA.ORG](https://www.ncqa.org)

Medicaid | Medicare | Marketplace



oklahoma
complete health™

HEDIS® Adult Pocket Guide

Adult Pocket Guide
with codes are
available on
Oklahoma Complete
Health Website:

<https://www.oklahomacompletehealth.com/providers/resources/forms-resources.html>

HEDIS® Adult Pocket Guide: 2025 Measurement Year		
For a complete list of codes, please visit the NCQA website at ncqa.org , or see the HEDIS value sets. The following is a subset only of the NCQA approved codes.		
Prevention and Screening		
Measure	Best Practice	Codes
(AAP) Adults' Access to Preventive/Ambulatory Health Services (Age 20+) ^{1,2,3} Also known as Annual Preventive Visit (APV)	Once a year. Commercial member who had an ambulatory or preventive care visit during the MY or the two years prior to the MY.	99381-99387, 99391-99397, G0402, G0438, G0439, S0620, S0621
(BCS-E) Breast Cancer Screening (Female Age 50-74) ^{1,2,3}	Mammogram - every 2 years	77061-77063, 77065-77067, G9054, Z90.13
(CCS-E) Cervical Cancer Screening (Female Age 21-64) ^{1,3}	Cervical Cytology Lab Test (age 21-64)	88141-88143, 88147, 88148, 88150, 88152, 88153, 88164-88167, 88174, 88175, G0123, G0124, G0141, G0143-G0145, G0147, G1048, P3000, P3001, Q0091
	hrHPV Test (age 30-64)	87624, 87625, G0476
(CHL) Chlamydia Screening (Age 16-24) ^{1,3}	Chlamydia Test	87110, 87270, 87320, 87490-87492, 87810
(COL-E) Colorectal Cancer Screening (Age 45-75) ^{1,2,3}	Colonoscopy - within past 10 years	44388-44392, 44394, 44401-44408, 45378-45382, 45384-45386, 45388-45393, 45398, G0105, G0121
	Flexible Sigmoidoscopy - within past 5 years	45330-45335, 45337-45338, 45340-45342, 45346, 45347, 45349, 45350, G0104
	CT Colonography - within past 5 years	74261-74263
	sDNA FIT Lab Test - within past 3 years	81528
	FOBT Lab Test - within measurement year	82270, 82274, G0328
Colorectal Cancer		C18.0-C18.9, C19, C20, C21.2, C21.8, C78.5, Z85.038, Z85.048
Cardiovascular Conditions		
Measure	Best Practice	Codes
(CBP) Controlling High Blood Pressure (Age 18-85) ^{1,2,3}	Essential Hypertension	I10
	Systolic Greater Than/Equal to 140	3077F
	Systolic Less Than 140	3074F, 3075F
	Diastolic Greater Than/Equal to 90	3080F
	Diastolic 80-89	3079F
	Diastolic Less Than 80	3078F
	Telephone Visits	98966-98968, 99441-99443

HEDIS® Pediatric Pocket Guide

Pediatric Pocket Guide with codes are available on Oklahoma Complete Health Website:

<https://www.oklahomacompletehealth.com/providers/resources/forms-resources.html>

HEDIS® Pediatric Pocket Guide: 2025 Measurement Year		
For a complete list of codes, please visit the NCQA website at ncqa.org , or see the HEDIS value sets. The following is a subset only of the NCQA approved codes.		
All Well-Child Visits		
Must include the following: Documentation of a visit with an acceptable provider type, the date of the visit, and services to validate a well-child visit was performed.		
Measure	Best Practice	Codes
(W30) Well-Child Visits in the First 30 Months of Life (0–30 months) ^{1,2}	<p>Well-Child Visits in the First 15 Months. For children who turned 15 months old during the measurement year: Six or more well-child visits.</p> <p>Well-Child Visits for 15–30 Months of Age. For children who turned 30 months of age during the measurement year: Two or more well-child visits.</p>	99381, 99382, 99391, 99392, 99461, G0438, G0439, S0302, Z00.110, Z00.111, Z00.121, Z00.129
(WCV) Child and Adolescent Well-Care Visits (3–21 years of age) ^{1,2}	One or more comprehensive well-care visits with a PCP or OB/GYN within the measurement year. Visits occurring anytime in the measurement year, including prior to or after the patient's birthday, close the gap.	99382–99385, 99391–99395, G0438, G0439, S0302, S0610, S0612, S0613, Z00.00, Z00.01, Z00.121, Z00.129, Z00.2, Z00.3, Z01.411, Z01.419, Z02.5, Z76.2
Respiratory Conditions		
Measure	Best Practice	Codes
(CWP) Appropriate Testing for Pharyngitis ^{1,2}	<p>Episodes for members 3 years of age and older where the member is:</p> <ul style="list-style-type: none"> Diagnosed with pharyngitis Dispensed an antibiotic Received a group A strep test <p>Note: Test for Group A Strep before dispensing an antibiotic.</p>	<p>Group A Strep Test: 87070, 87071, 87081, 87430, 87650-87652, 87880</p> <p>Pharyngitis: J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91</p>
Weight Assessment and Counseling for Nutrition & Physical Activity		
Measure	Best Practice	Codes
(WCC) Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (3–17 years of age) ^{1,2}	Visit with PCP or OB/GYN in measurement year with documentation of or claim for discussion of BMI percentile, AND nutrition and diet, AND physical activity.	BMI: Z68.51, Z68.52, Z68.53, Z68.54 Nut: 97802–97804, G0270, G0271, G0447, S9449, S9452, S9470 PA: G0447, S9451, Z02.5, Z71.82

Lines of Business:

- ¹Medicaid
- ²Marketplace

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

OklahomaCompleteHealth.com

Oklahoma Complete Health and Ambetter are affiliated products serving Medicaid and Health Insurance Marketplace members, respectively. The information presented here is representative of our network of products. If you have any questions, please contact Provider Relations.



Feedback Survey



Coding for Success Feedback Survey - Adult and Child Immunization HEDIS® Measures



Thank you for your participation. The purpose of this questionnaire is to collect your feedback, which will help us improve this event in the future. All information will remain confidential.

AAPC CEU Approved Certificate Index# OCH0613250903RGA

Oklahoma Complete Health

Certificate of Approval

Name

Coding for Success: Understanding AIS-E, CIS-E, IMA-E, PRS-E, & LSC HEDIS® Measures




Index # OCH0613250903RGA

This Index # is valid for education purchased prior to
7/30/2026

Date

This program meets AAPC guidelines for 1.0 CEUs. Can be split between Core A and all specialties except CIRCC for continuing education units.

*This program has the prior approval of AAPC for continuing education hours. Granting of prior approval in no way constitutes endorsement by AAPC of the program content or the program sponsor.

Questions?

Email:

Quality_OCH@OklahomaCompleteHealth.com
