2025 P4P PROGRAM QUICK REFERENCE GUIDE FOR BILLING STAFF (FOR CFMG)

MEASURE	MEASURE	DESCRIPTION	DOCUMENTATION
TYPE Clinical Quality Measure	Childhood Immunizations: Combo 10	 Children who turned two (2) during the measurement year and received the following immunizations by their 2nd birthday: Four (4) DTaP (Diphtheria, Tetanus, Acellular Pertussis) Three (3) IPV (Polio) One (1) MMR (Measles, Mumps, Rubella) or history of Measles, Mumps, and, Rubella Three (3) HiB (H Influenza Type B) Three (3) HepB (Hepatitis B) One (1) VZV (Varicella) or History of Chicken Pox Four (4) PCV (Pneumococcal Conjugate) One (1) HepA (Hepatitis A) RV (Rotavirus): 2-dose or 3-dose schedule Two (2) Influenza - One (1) of the two (2) can be an LAIV vaccination administered on their 2nd birthday 	DTaP CPT: 90697,90698, 90700, 90723 IPV CPT: 90697, 90698, 90713, 90723 MMR CPT: 90707, 90710 History of Measles - ICD-10 Dx: B05.0 – B05.4, B05.81, B05.89, B05.9 History of Mumps - ICD-10 Dx: B26.0 – B26.3, B26.81 – B26.85, B26.89, B26.9 History of Rubella - ICD-10 Dx: B06.00- B06.02, B06.09, B06.81, B06.82, B06.89, B06.9 HiB CPT: 90644, 90647, 90648, 90697,90698, 90748 HepB CPT: 90697,90723, 90740, 90744, 90747, 90748 History of HepB - ICD-10 Dx: B16.0-B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11 VZV CPT: 90710, 90716 History of Chicken Pox - ICD-10 Dx: B01.0, B01.11, B01.12, B01.2, B01.81, B01.89, B01.9, B02.0, B02.1, B02.21-B02.24, B02.29, B02.30-B02.34, B02.39, B02.7, B02.8, B02.9 PCV CPT: 90670 HepA CPT: 90633 History of HepA - ICD-10 Dx: B15.0, B15.9 RV CPT: 90681 (2-dose schedule), 90680 (3-dose schedule) Influenza CPT: 90756, 90674, 90689, 90687, 90688, 90685, 90686, 90657, 90655, 90673, 90672, 90660 Influenza LAIV CPT: 90660, 90672
Clinical Quality Measure	Immunizations for Adolescents: Combo 2	 Adolescents who turned 13 years of age during the measurement year and received the following immunizations by their 13th birthday: One (1) Meningococcal Serogroups A, C, W, Y One (1) Tdap (Tetanus, Diphtheria, Acellular Pertussis) Two (2) HPV at least 146 days apart or three (3) HPV between their 9th and 13th birthday 	Meningococcal CPT: 90619, 90733, 90734, 90623 Tdap CPT: 90715 HPV CPT: 90649, 90650, 90651
Clinical Quality Measure	Well-Child Visits in the First 15 Months of Life: Six (6) or More Visits	Children who turned 15 months old during the measurement year and had six (6) or more well-child visits with a PCP during their first 15 months of life.	CPT: 99461, 99385, 99384, 99382, 99381, 99383, 99395, 99394, 99392, 99391, 99393 Or ICD-10 Dx: Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z76.1, Z76.2, Z02.84
Clinical Quality Measure	Well-Child Visits for Age 15 Months to 30 Months: Two (2) or More Visits	Children who turned 30 months old during the measurement year and had two (2) or more well-child visits with a PCP between their 15-month birthday plus one (1) day and their 30-month birthday.	CPT: 99461, 99385, 99384, 99382, 99381, 99383, 99395, 99394, 99392, 99391, 99393 Or ICD-10 Dx: Z00.121, Z00.129, Z00.2, Z76.1, Z76.2

2025 P4P PROGRAM QUICK REFERENCE GUIDE FOR BILLING STAFF (FOR CFMG)

MEASURE TYPE	MEASURE	DESCRIPTION	DOCUMENTATION
Clinical Quality Measure	Child and Adolescent Well-Care Visits	Members 3-21 years of age who had one (1) or more well-care visits with a PCP or OB/GYN during the measurement year.	CPT: 99382-99385, 99392-99395 Or ICD-10 Dx: Z00.00, Z00.01, Z00.121, Z00.129, Z00.2, Z00.3, Z02.5, Z76.2
Clinical Quality Measure	Lead Screening in Children	Children two (2) years of age who had one (1) or more capillary or venous lead blood tests for lead poisoning by their 2nd birthday.	CPT: 83655 Or LOINC: Codes submitted by lab
Clinical Quality Measure	Developmental Screening in the First Three (3) Years of Life	Children screened for risk of developmental, behavioral, and social delays using a standardized screening tool in the 12 months preceding or on their first, second, or third birthday in the measurement year.	CPT : 96610
Other Measure	Initial Health Appointment	New or reenrolled members who had a visit or two documented outreach attempts within 120 days of provider assignment.	Behavioral Health CPT Code: 96156 OB/GYN CPT Codes: 59400, 59425, 59426, 59430, 59510, 59610, 59618 OB/GYN Z Codes: Z1000, Z1008, Z1020, Z1032, Z1034, Z1036, Z1038 PCP CPT Codes: 99202-99205, 99461, 99211-99215, 99381-99387, 99391-99397 PCP Z Codes: Z1000, Z1008, Z1020, Z1032, Z1034, Z1036, Z1038, Z1016, Z00.01, Z00.110, Z00.111, Z00.8, Z02.1, Z02.3, Z02.5 We will accept telehealth visits with a Place of Service Code 02 or Modifier 95. To submit evidence of two outreach attempts or a completed IHA within the last 12 months use CPT code 99080 with ICD-10:Z76.89
Monitoring Measure	Avoidable Emergency Department (ED) visits per 1000	Members who had avoidable ED visits during the measurement year, using the John Hopkins ACG criteria for either "Emergent, primary care treatable" or "Non-emergent" visits.	Codes submitted by hospital.
Monitoring Measure	Depression Screening and Follow-Up for Adolescents and Adults	 Members 12 years of age and older who were screened for clinical depression using a standardized instrument and, if screened positive, received follow-up care during the measurement year. Depression Screening – The percentage of members who were screened for clinical depression using a standardized instrument. Follow-up on Positive Screening – The percentage of members who received follow-up care within 30 days of a positive depression screening. 	 Billing Codes for Numerator 2: CPT Codes for Follow-up Visit: 98960-98968, 99078, 99201-99205, 99211-99215, 92217-99220, 99241-99245, 99341-99345, 99347-99350, 99381- 99387, 99391-99397, 99401-99404, 99411-99412, 99441-99483 F32.89, F32.9, F33.0–F33.3, F33.42, F33.9, F43.21, F43.23

2025 P4P PROGRAM QUICK REFERENCE GUIDE FOR BILLING STAFF (FOR CFMG)

MEASURE TYPE	MEASURE	DESCRIPTION	DOCUMENTATION
Monitoring Measure	Non-Utilizers	Assigned members that did not receive services in the last 12 months but visited a PCP during the measurement year.	 CPT: 99201-99499, if covered Medi-Cal code Visit must be in an outpatient setting – e.g., Office POS 11, FQHC POS 50. Visit must be with a provider that is contracted as a PCP or mid-level.
Monitoring Measure	Topical Fluoride for Children	Children ages 1-20 who received at least two (2) topical fluoride applications as: (1) dental or oral health services, (2) dental services, and (3) oral health services during the measurement year.	CPT Code for 1-5 years of age: 99188

If you have any questions, please call: Alliance Provider Services Department

Monday – Friday, 7:30 am – 5 pm Phone Number: **1.510.747.4510** www.alamedaalliance.org



ANALYTICS_PRVDR_P4P MY 2025_QUICK REF GUIDE_BILLING STAFF (CFMG) 12/2024