

# Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan eCQM CMS69v12

Last modified on 10/08/2024 2:44 pm EDT

## Description:

Percentage of patients aged 18 years and older with a BMI documented during the current encounter or during the measurement period AND who had a follow-up plan documented if BMI was outside of normal parameter.

## Guidance:

### BMI Measurement Guidance:

- Height and Weight - An eligible professional or their staff is required to measure both height and weight. Both height and weight must be measured during the measurement period. Self-reported values cannot be used.
- The BMI may be documented in the medical record of the provider or in outside medical records obtained by the provider.
- If the documented BMI is outside of normal parameters, then a follow-up plan is documented during the encounter or during the measurement period.
- If more than one BMI is reported during the measurement period, and any of the documented BMI assessments is outside of normal parameters, documentation of an appropriate follow-up plan will be used to determine if performance has been met.
- Review the exclusions and exceptions criteria to determine those patients that BMI measurement may not be appropriate or necessary.

### Follow-Up Plan Guidance:

- The documented follow-up plan must be based on the documented BMI, outside of normal parameters, example: "Patient referred to nutrition counseling for BMI above or below normal parameters." See the Definition section for examples of follow-up plan treatments.

Variation has been noted in studies exploring optimal BMI ranges for the elderly (see Donini et al., [2012]; Holme & Tonstad [2015]; Diehr et al. [2008]). Notably, however, all these studies have arrived at ranges that differ from the standard range for ages 18 and older, which is  $\geq 18.5$  and  $< 25$  kg/m<sup>2</sup>. For instance, both Donini et al. and Holme and Tonstad reported findings that suggest that higher BMI (higher than the upper end of 25kg/m<sup>2</sup>) in the elderly may be beneficial. Similarly, worse outcomes have been associated with being underweight (at a threshold higher than 18.5 kg/m<sup>2</sup>) at age 65 (Diehr et al. 2008). Because of optimal BMI range variation recommendations from these studies, no specific optimal BMI range for the elderly is used. However, it may be appropriate to exempt certain patients from a follow-up plan by applying the exception criteria. See the Denominator Exception section for examples.

This eCQM is a patient-based measure. This measure is to be reported a minimum of once per measurement period for patients seen during the measurement period.

This measure may be reported by eligible professionals who perform the quality actions described in the measure based on the services provided at the time of the qualifying encounter and the measure-specific denominator coding.

Telehealth encounters are not eligible for this measure because the measure requires a clinical action that cannot be conducted via telehealth.

This version of the eCQM uses QDM version 5.6. Please refer to the eCQI resource center (<https://ecqi.healthit.gov/qdm>) for more information on the QDM

**Initial Population:**

All patients aged 18 and older on the date of the encounter with at least one qualifying encounter during the measurement period.

Date of birth information can be entered in DrChrono in the patient chart under the **Demographics** tab with the **Patient's Date of Birth**.

**With an encounter during the measurement period where BMI could be assessed**

**CPT Codes:**

**Enter CPT Codes**

**HCPCS Codes:**

**Enter HCPCS Codes**

CPT and HCPCS codes can be entered into the billing section for the encounter. Below is an example from the appointment window.

Appointment **Billing** Eligibility Vitals Growthcharts Flags Log Comm. Revisions Custom Data MU Helper

Institutional Claim Patient SuperBill Clinical Note Billing Details Other Forms

**Billing Status**

ICD Version

Patient Payment \$  Copay: \$20

Pre Authorization Approval

Referral #

Payment Profile

Billing Profile

Billing Pick List

Diagnosis Pick List

Credit Card Payment

**HCFA Box 10 - Is patient's condition related to:**

Employment

Auto Accident

Other Accident

Onset Date Type

Onset Date

Other Date Type

Other Date

Claim Billed: \$145.00 Adjustment: \$0.00 Insurer Paid: \$0.00 Patient Paid: \$0.00

**ICD-10 Codes**

#	Code	Description

**ICD-9 Codes to Convert**

#	Code	Description

**NDC Codes**

NDC Code	Quantity	Units	Line Item

**Custom Codes**

Code	Description	Price (\$)

**CPT Codes**

Code	Description	Price (\$)
1 99213	OFFICE O/P EST LOW 20-29 MIN	145.00

Modifiers:

Quantity/Minutes:

Diagnosis Pointers:

**HCPCS Codes**

Code	Description	Price (\$)
1 G0438	Ppps initial visit	0.00

Modifiers:

**Denominator:**

Equals initial population.

**Denominator Exclusions:**

Patients who are pregnant at any time during the measurement period.

Patients receive palliative or hospice care at any time during the measurement period.

**Denominator Exceptions:**

Patients with a documented medical reason for not documenting BMI or for not documenting a follow-up plan for a BMI outside normal parameters (e.g., elderly patients 65 years of age or older for whom weight reduction/weight gain would complicate other underlying health conditions such as illness or physical disability, mental illness, dementia, confusion, or nutritional deficiency such as vitamin/mineral deficiency; patients in an urgent or emergent medical situation where time is of the essence and to delay treatment would jeopardize the patient's health status).

Patients who refuse measurement of height and/or weight.

**Numerator:**

Patients with a documented BMI during the encounter or the measurement period, AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or the measurement period.

BMI can be documented in the Vitals section for the patient's encounter.

**Schedule Appointment**

Appointment | Billing | Eligibility | **Vitals** | Growthcharts | Flags | Log Comm. | Revisions | Custom Data | MU Helper

Units Full Vitals History (pdf) Full Vitals History (csv)

**System Vitals** Note Rendering Options: Newest to oldest | Date on side

Name	01/13/2021 11:00 AM	01/19/2021 11:40 AM	01/20/2021 07:00 AM	01/22/2021 10:20 AM	01/25/2021 10:00 AM	Current Visit 01/26/2021 at 07:10 AM
Temperature (f)						<input type="text"/>
Pulse (bpm)						<input type="text"/>
Blood Pressure (mmHg)						<input type="text"/> / <input type="text"/>
Respiratory Rate (rpm)						<input type="text"/>
Oxygen Saturation (%)						<input type="text"/>
Height (in)						<input type="text" value="60"/>
Weight (lbs)						<input type="text" value="200"/>
BMI (kg/m2)						<input type="text" value="39.06"/>
Pain (1-10)						<input type="text"/>
Smoking Status						<input type="text"/>
Head Circumference (in)						<input type="text"/>

This will be saved in the patient's chart under the Physical Exam area in the CQMs section with the LOINC code 39156-5.

Allergy List <span>0</span>	<p><b>Physical Exam</b> <span>+ New</span></p> <table border="1"> <thead> <tr> <th>Datetime</th> <th>Code</th> <th>Description</th> <th>Value</th> <th>Units</th> <th></th> </tr> </thead> <tbody> <tr> <td>Mar 30, 2023</td> <td>LOINC: 39156-5</td> <td></td> <td>28.25</td> <td>kg/m2</td> <td><input type="text"/> <input type="text"/></td> </tr> <tr> <td>Mar 29, 2023</td> <td>SNOMEDCT: 252779009</td> <td>Single bright white flash electroretinography (procedure)</td> <td></td> <td></td> <td><input type="text"/> <input type="text"/></td> </tr> <tr> <td>Oct 28, 2022</td> <td>LOINC: 8480-6</td> <td>Systolic blood pressure</td> <td>120</td> <td></td> <td><input type="text"/> <input type="text"/></td> </tr> <tr> <td>Oct 28, 2022</td> <td>LOINC: 8462-4</td> <td>Diastolic blood pressure</td> <td>80</td> <td></td> <td><input type="text"/> <input type="text"/></td> </tr> </tbody> </table>	Datetime	Code	Description	Value	Units		Mar 30, 2023	LOINC: 39156-5		28.25	kg/m2	<input type="text"/> <input type="text"/>	Mar 29, 2023	SNOMEDCT: 252779009	Single bright white flash electroretinography (procedure)			<input type="text"/> <input type="text"/>	Oct 28, 2022	LOINC: 8480-6	Systolic blood pressure	120		<input type="text"/> <input type="text"/>	Oct 28, 2022	LOINC: 8462-4	Diastolic blood pressure	80		<input type="text"/> <input type="text"/>
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Drug Interactions <span>13</span>																															
<b>CQMs</b>																															
Intake Data																															
Lab Orders																															

Follow-up for high or low BMI can be documented in different areas depending on the code type.

### ICD-10

ICD-10 codes can be added to the billing or assessment section of a patient's appointment or in the patient's chart under the Problem List.

- Z71.3 Dietary counseling and surveillance
- Z71.82 Exercise counseling

**Schedule Appointment**

Appointment | **Billing** | Eligibility | Vitals | Growthcharts | Flags | Log Comm. | Revisions | Custom Data | MU Helper

Institutional Claim

Patient SuperBill | Clinical Note | Billing Details | Other Forms

Billing Status:  ICD Version: ICD-10

Patient Payment: \$ 0 Copay: \$20

Pre Authorization Approval:  Referral #:

Payment Profile: Insurance

Billing Profile:  Billing Pick List: Choose Codes from Pick List

Diagnosis Pick List: Choose Codes from Pt Problems

Credit Card Payment:

**HCFA Box 10 - Is patient's condition related to:**

Employment: No Auto Accident: No Other Accident: No

Onset Date Type: Onset of Current Symptoms Onset Date:

Other Date Type: - Other Date Type - Other Date:

Claim Billed: \$145.00 Adjustment: \$0.00 Insurer Paid: \$0.00 Patient Paid: \$0.00

ICD-10 Codes: Find Diagnosis codes

#	Code	Description
1	Z71.3	Dietary counseling and surveillance

CPT Codes: Find CPT Procedure codes

Code	Description	Price (\$)

**Enter Problem**

Problem: Exercise counseling

ICD Version: ICD-10

ICD10 code: Z71.82

SnoMED CT code:

Status: active

Appointment:

3/30/2023 11:30AM  
3/28/2023 01:40PM  
3/24/2023 11:10AM  
3/23/2023 11:30AM  
3/22/2023 11:10AM  
3/21/2023 09:50AM  
3/16/2023 11:30AM  
3/08/2023 11:30AM  
3/02/2023 11:30AM

Appointment associated with this problem. Highly recommended for reporting accuracy.

## CPT Codes and HCPCS

CPT and HCPCS Codes for the follow-up can be entered in the billing section for the encounter.

**Schedule Appointment**

Appointment | **Billing** | Eligibility | Vitals | Growthcharts | Flags | Log Comm. | Revisions | Custom Data | MU Helper

Institutional Claim

Patient SuperBill | Clinical Note | Billing Details | Other Forms

Billing Status:  ICD Version: ICD-10

Patient Payment: \$ 0 Copay: \$20

Pre Authorization Approval:  Referral #:

Payment Profile: Insurance

Billing Profile:  Billing Pick List: Choose Codes from Pick List

Diagnosis Pick List: Choose Codes from Pt Problems

Credit Card Payment:

**HCFA Box 10 - Is patient's condition related to:**

Employment: No Auto Accident: No Other Accident: No

Onset Date Type: Onset of Current Symptoms Onset Date:

Other Date Type: - Other Date Type - Other Date:

Claim Billed: \$60.00 Adjustment: \$0.00 Insurer Paid: \$0.00 Patient Paid: \$0.00

ICD-10 Codes: Find Diagnosis codes

#	Code	Description
1	Z71.3	Dietary counseling and surveillance

ICD-9 Codes to Convert: Find Diagnosis codes

#	Code	Description

NDC Codes: Find NDC Codes

NDC Code	Quantity	Units	Line Item

Custom Codes: Find Custom Procedure codes

Code	Description	Price (\$)

CPT Codes: Find CPT Procedure codes

Code	Description	Price (\$)
1 97802	MEDICAL NUTRITION INDIV IN	60.00

Modifiers: --- --- --- ---

Quantity/Minutes: 1.00

Diagnosis Pointers: 1:0:0:0

HCPCS Codes: Find HCPCS Procedure codes

Code	Description	Price (\$)
1 G0447	Behavior counsel obesity 15m	0.00

Modifiers: --- --- --- ---

## HCPCS codes

G0270

Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition or treatment regimen (including additional hours needed for renal disease), individual, face to face with the patient, each 15 minutes

G0271	Medical nutrition therapy, reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), group (2 or more individuals), each 30 minutes
G0447	Face-to-face behavioral counseling for obesity, 15 minutes
G0473	Face-to-face behavioral counseling for obesity, group (2-10), 30 minutes
S9449	Weight management classes, non-physician provider, per session
S9451	Exercise classes, non-physician provider, per session
S9452	Nutrition classes, non-physician provider, per session
S9470	Nutritional counseling, dietitian visit

#### CPT Codes

43644	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less)
43645	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction to limit absorption
43659	Unlisted laparoscopy procedure, stomach
43770	Laparoscopy, surgical, gastric restrictive procedure; placement of adjustable gastric restrictive device (eg, gastric band and subcutaneous port components)
43771	Laparoscopy, surgical, gastric restrictive procedure; revision of adjustable gastric restrictive device component only
43772	Laparoscopy, surgical, gastric restrictive procedure; removal of adjustable gastric restrictive device component only
43773	Laparoscopy, surgical, gastric restrictive procedure; removal and replacement of adjustable gastric restrictive device component only
43774	Laparoscopy, surgical, gastric restrictive procedure; removal of adjustable gastric restrictive device and subcutaneous port components
43842	Gastric restrictive procedure, without gastric bypass, for morbid obesity; vertical-banded gastroplasty
43843	Gastric restrictive procedure, without gastric bypass, for morbid obesity; other than vertical-banded gastroplasty
43845	Gastric restrictive procedure with partial gastrectomy, pylorus-preserving duodenoileostomy and ileoileostomy (50 to 100 cm common channel) to limit absorption (biliopancreatic diversion with duodenal switch)
43846	Gastric restrictive procedure, with gastric bypass for morbid obesity; with short limb (150 cm or less) Roux-en-Y gastroenterostomy
43847	Gastric restrictive procedure, with gastric bypass for morbid obesity; with small intestine reconstruction to limit absorption
43848	Revision, open, of gastric restrictive procedure for morbid obesity, other than adjustable gastric restrictive device (separate procedure)
43886	Gastric restrictive procedure, open; revision of subcutaneous port component only
43888	Gastric restrictive procedure, open; removal and replacement of subcutaneous port component only
97802	Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes
97803	Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes
97804	Medical nutrition therapy; group (2 or more individual(s)), each 30 minutes

- 98960 Education and training for patient self-management by a qualified, nonphysician health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; individual patient
- 99078 Physician or other qualified health care professional qualified by education, training, licensure/regulation (when applicable) educational services rendered to patients in a group setting (eg, prenatal, obesity, or diabetic instructions)
- 99401 Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes
- 99402 Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 30 minutes
- 97802 Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes
- 97803 Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes
- 97804 Medical nutrition therapy; group (2 or more individual(s)), each 30 minutes
- 98960 Education and training for patient self-management by a qualified, nonphysician health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; individual patient
- 99078 Physician or other qualified health care professional qualified by education, training, licensure/regulation (when applicable) educational services rendered to patients in a group setting (eg, prenatal, obesity, or diabetic instructions)
- 99401 Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes
- 99402 Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 30 minutes
- 97802 Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes
- 97803 Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes
- 97804 Medical nutrition therapy; group (2 or more individual(s)), each 30 minutes
- 98960 Education and training for patient self-management by a qualified, nonphysician health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; individual patient
- 99078 Physician or other qualified health care professional qualified by education, training, licensure/regulation (when applicable) educational services rendered to patients in a group setting (eg, prenatal, obesity, or diabetic instructions)
- 99401 Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes
- 99402 Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 30 minutes

## SNOMEDCT Codes

SNOMED CT codes can be entered in the patient's chart under the Intervention area of the CQMs section. Click the **+New** button.

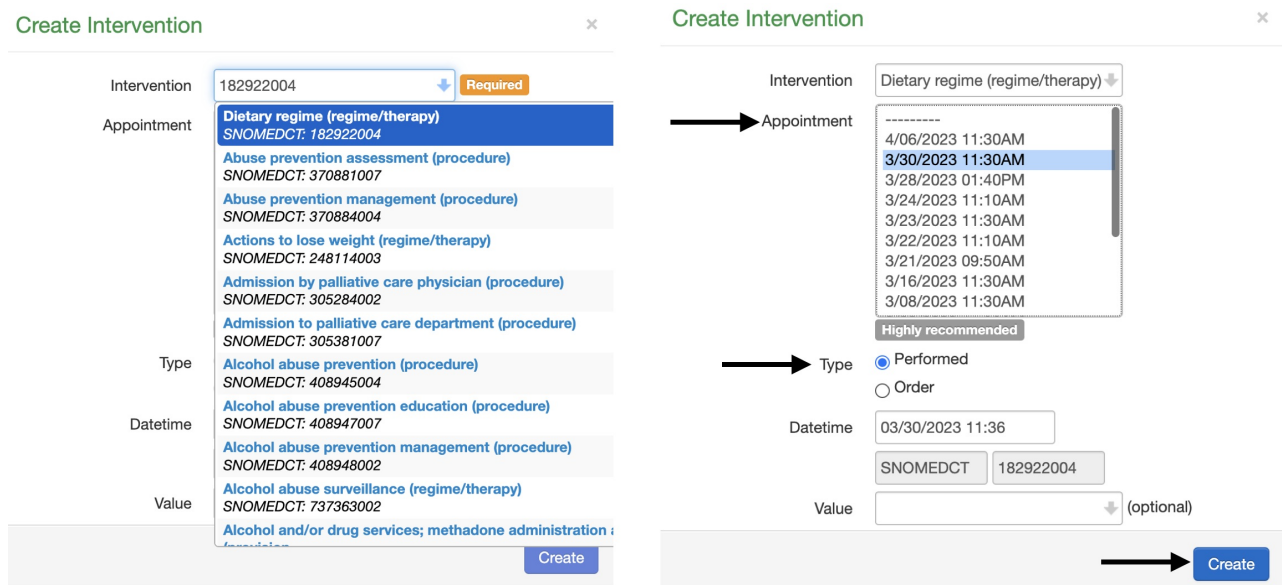
- Send eHX
- Allergy List 0
- Drug Interactions 13
- CQMs
- Intake Data
- Lab Orders

### Intervention

→ + New

Datetime	Code	Description	Value	
Mar 30, 2023	SNOMEDCT: 182922004	Dietary regime (regime/therapy)		✎ ✖
Dec 22, 2022	SNOMEDCT: 390864007	Referral for exercise therapy (procedure)		✎ ✖
Aug 26, 2022	SNOMEDCT: 413473000	Counseling about alcohol consumption (procedure)		✎ ✖
May 25, 2022	HCPSC: G8417	Bmi is documented above normal parameters and a follow-up plan is documented	Obesity (disorder)	✎ ✖

You can enter the code or search by keyword. Select an appointment, performed or ordered, and then click **Create**.



- 182922004 Dietary regime (regime/therapy)
- 304549008 Giving encouragement to exercise (procedure)
- 307818003 Weight monitoring (regime/therapy)
- 370847001 Dietary needs education (procedure)
- 386291006 Exercise promotion: strength training (procedure)
- 386292004 Exercise promotion: stretching (procedure)
- 386373004 Nutrition therapy (regime/therapy)
- 386463000 Prescribed activity/exercise education (procedure)
- 386464006 Prescribed diet education (procedure)
- 410177006 Special diet education (procedure)
- 413315001 Nutrition / feeding management (regime/therapy)
- 418995006 Feeding regime (regime/therapy)
- 424753004 Dietary management education, guidance, and counseling (procedure)
- 443288003 Lifestyle education regarding diet (procedure)
- 183515008 Referral to physician (procedure)
- 183524004 Referral to psychiatry service (procedure)
- 183583007 Refer to mental health worker (procedure)
- 306136006 Referral to liaison psychiatry service (procedure)
- 306163007 Referral to dietetics service (procedure)
- 306164001 Referral to community-based dietetics service (procedure)
- 306165000 Referral to hospital-based dietetics service (procedure)
- 306166004 Referral to occupational therapy service (procedure)
- 306167008 Referral to community-based occupational therapy service (procedure)
- 306168003 Referral to hospital-based occupational therapy service (procedure)
- 306226009 Referral to mental health counseling service (procedure)
- 306227000 Referral for mental health counseling (procedure)
- 306252003 Referral to mental health counselor (procedure)
- 306344004 Referral to professional allied to medicine (procedure)
- 306353006 Referral to community-based dietitian (procedure)
- 306354000 Referral to hospital-based dietitian (procedure)
- 308459004 Referral to psychologist (procedure)
- 308470006 Referral to general physician (procedure)



308477009	Referral to psychiatrist (procedure)
390864007	Referral for exercise therapy (procedure)
390866009	Referral to mental health team (procedure)
390893007	Referral to physical activity program (procedure)
408289007	Refer to weight management program (procedure)
416790000	Referral for home physical therapy (procedure)

#### **Numerator Exclusions**

Not applicable

[Measure Information](#)

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