



Note: PIP incentive for this measure is limited to the Medicaid plan for members between the ages of 20-44



Adults' Access to Preventive/Ambulatory Health Services (AAP)

This measure evaluates the percentage of adults aged 20 and older who had at least one ambulatory or preventive care visit during the measurement year.

Product lines	Quality programs impacted	Collection and reporting method
<ul style="list-style-type: none"> Commercial Medicaid Medicare 	<ul style="list-style-type: none"> State performance measure 	<ul style="list-style-type: none"> Administrative Claim data

Numerator compliance	<p>Medicaid and Medicare: One or more ambulatory or preventive care visits during the measurement year</p> <p>Commercial: One or more ambulatory or preventive care visits during the measurement year or the 2 years prior to the measurement year</p>											
Time Period	Jan. 1, 2026 – Dec. 31, 2026											
Billing codes	<table border="1"> <thead> <tr> <th>Description</th> <th>Code type</th> <th>Codes</th> </tr> </thead> <tbody> <tr> <td>Ambulatory visits</td> <td>CPT</td> <td>92002, 92004, 92012, 92014, 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98016, 98966, 98967, 98968, 98970, 98971, 98972, 98980, 98981, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99421, 99422, 99423, 99429, 99441, 99442, 99443, 99457, 99458, 99483</td> </tr> <tr> <td></td> <td>HCPCS</td> <td>G0071, G0402, G0438, G0439, G0463, G2010, G2012, G2250, G2251, G2252, S0620, S0621, T1015</td> </tr> </tbody> </table>	Description	Code type	Codes	Ambulatory visits	CPT	92002, 92004, 92012, 92014, 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98016, 98966, 98967, 98968, 98970, 98971, 98972, 98980, 98981, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99421, 99422, 99423, 99429, 99441, 99442, 99443, 99457, 99458, 99483		HCPCS	G0071, G0402, G0438, G0439, G0463, G2010, G2012, G2250, G2251, G2252, S0620, S0621, T1015		
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	SNOMED	1269517007, 1269518002, 162651007, 162655003, 170107008, 170114005, 170123008, 170132005, 170141000, 170150003, 170159002, 170168000, 170250008, 170254004, 170263002, 170272005, 170281004, 170290006, 170300004, 170309003, 18170008, 185317003, 19681004, 207195004, 209099002, 210098006, 243788004, 268563000, 268565007, 281029006, 281031002, 314849005, 386472008, 386473003, 401140000, 401267002, 410620009, 410622001, 410623006, 410624000, 410625004, 410626003, 410627007, 410628002, 410629005, 410630000, 410631001, 410632008, 410633003, 410634009, 410635005, 410636006, 410637002, 410638007, 410639004, 410640002, 410641003, 410642005, 410643000, 410644006, 410645007, 410646008, 410647004, 410648009, 410649001, 410650001, 442162000, 699134002, 712791009, 713020001, 783260003
	UBREV	0510, 0511, 0513, 0514, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0524, 0525, 0526, 0527, 0528, 0529, 0982, 0983
	Reason for ambulatory visit	ICD-10 diagnosis Z00.00, Z00.01, Z00.121, Z00.129, Z00.3, Z00.5, Z00.8, Z02.0, Z02.1, Z02.2, Z02.3, Z02.4, Z02.5, Z02.6, Z02.71, Z02.79, Z02.81, Z02.82, Z02.83, Z02.84, Z02.89, Z02.9, Z76.1, Z76.2
Frequency/occurrence	<ul style="list-style-type: none"> • Medicaid and Medicare patients every year • Commercial patients at least every three years 	
Required exclusions	Exclude patients who used hospice services or elected hospice benefits at any time during the measurement year.	
Test, service or procedure to close care opportunity	<ul style="list-style-type: none"> • Ambulatory visit • Preventive care visit 	
Medical record documentation for open gaps in care (including but not limited to)	<p>Medical record dates: 01/01/2026 – 12/31/2026</p> <ul style="list-style-type: none"> • Health history and physical • Home health records • Progress notes • SOAP notes <p>Submit medical record documentation to Priority Health HEDIS department:</p> <ul style="list-style-type: none"> • Electronically uploading medical records – please contact • HEDIS@PriorityHealth.com to get a file set up or for more information 	

- Email: HEDIS@PriorityHealth.com
- Fax: 616.975.8897
- Mail: HEDIS at 1231 E Beltline Ave NE Mail Stop 1280, Grand Rapids, MI, 49525

Tips and best practices

- **Check your PIP reports to identify patients with open care opportunities**
- Have patients complete an annual preventative care visit / wellness check
- Outreach to patients who have not had a preventive or ambulatory health visit to schedule a check-up
- Report all services provided and submit appropriate billing codes
- Progress reports and/or consultation reports can be accepted as supplemental data