

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

By collaborating, we can improve health outcomes for your patients, our members. This MDwise tip sheet provides best practices and tips that can optimize HEDIS scores and identify opportunities to improve patient care.

What Is the Measure?

This measure examines whether adult members ages 20 years and older receive preventive and ambulatory services from an organization. It looks at the percentage of members who have had a preventive or ambulatory visit with their physician.



IHCP-Covered Codes to Identify AAP:

Description	Codes
Ambulatory Visits	CPT: 92002, 92004, 92012, 92014, 98980, 98981, 99202-99205, 99211-99215, 99304-99310, 99315, 99316, 99344, 99345, 99347-99350, 99381-99387, 99391-99397, 99401, 99457, 99458 HCPCS: G0463, T1015 ICD10CM: Z00.00, Z00.01, 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, Z02.89, Z02.9, Z76.1, Z76.2
Online Assessments	CPT: 99457, 99458

Earn incentive dollars when your members meet this measure! *

For example, a panel of 500 members = \$375/month

*MDwise reports two (2) age stratifications for the AAP measure: 20-44 and 45-64 years of age

[Physician Pay for Value \(mdwise.org\)](https://www.mdwise.org)

How to Improve Your Quality Score:

- **Educate patients** on the importance of having at least one (1) ambulatory or preventive care visit during each calendar year.
- **Contact patients** who have not had a preventive or ambulatory health visit.
- **Report the appropriate codes** for members with one or more AAP visits during the measurement year or the two (2) years before.
- **Report all services** provided and utilize appropriate billing codes.
- **Request AAP gaps** in care lists for your group. Provider rosters can change throughout the year, and newly assigned members need to have care initiated.