

2026 Quality Incentive Program

CPT II Code Incentive

EmblemHealth will reimburse primary care providers for the utilization of CPT category II codes to address key quality measures. Reimbursement will include CPT II codes submitted from January 2026 onward.

Measure	CPT II Codes	Annual Frequency Allowed	Incentive
A1C	3044F — HbA1c less than 7.0 percent 3046F — HbA1c greater than 9.0 percent 3051F — HbA1c greater than 7.0 percent and less than 8.0 percent 3052F — HbA1c greater than or equal to 8.0 percent and less than or equal to 9.0 percent	One of these codes (as applicable) can be used up to 4 times per year, per member.	\$10 (up to 4 times, i.e. \$40 max)
Retinal Eye Exam	2022F — Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed: with evidence of retinopathy (DM) 2023F — Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed: without evidence of retinopathy (DM) 2024F — 7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed: with evidence of retinopathy (DM) 2025F — 7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed: without evidence of retinopathy (DM) 2026F — Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed: with evidence of retinopathy (DM) 2033F — Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed: without evidence of retinopathy (DM)	1 time a year, per member	\$10
Blood Pressure	Both codes must be present for the incentive to be paid. Systolic Blood Pressure 3074F — blood pressure less than 130 mmHg 3075F — blood pressure 130-139 mmHg 3077F — blood pressure greater than or equal to 140 mmHg Diastolic Blood Pressure 3078F — blood pressure less than 80 mmHg 3079F — blood pressure 80-89 mmHg 3080F — blood pressure greater than or equal to 90	One of these sets of codes, systolic and diastolic (as applicable), can be used up to 4 times per year, per member.	\$10 (up to 4 times, i.e. \$40 max)
Functional Status Assessment	1170F — Functional status assessed	1 time a year, per member	\$10
Medication Review	1159F — Medication list documented in medical record 1160F — Medication Review	1 time a year, per member	\$10