



HEDIS Highlights

Well Child, Adolescent, and Immunizations HEDIS Measures

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Learning Objective for Today's Training:

- Review all Well Child, Adolescent and Immunization HEDIS measures
- Improving HEDIS measures using appropriate CPT/ICD-10-CM Codes
- Tips for Documentation
- Closing HEDIS care gap during Sick Visit and Sports Physical

HEDIS Measures

- Well – Child Visits in the First 30 Months of Life (**W30**)
- Child and Adolescent Well – Care Visits (**WCV**)
- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (**WCC**)
- Childhood Immunization Status (**CIS**)
- Immunization for Adolescents (**IMA**)

W30 – Well Child Visits in the First 30 Months of Life

Members who had the following number of well-child visits with a PCP during the last 15 months.

The following two rates are reported:

1. Well-Child Visits in the First 15 Months. Children who turned 15 months old during the measurement year: **Six or more well-child visits.**

2. Well-Child Visits for Age 15 Months–30 Months. Children who turned 30 months old during the measurement year: **Two or more well-child visits.**



W30 – HEDIS Tips

The Recommendation for Preventive Pediatric Health Care Bright Futures/American Academy of Pediatrics – Periodicity

AGE ¹	INFANCY								EARLY CHILDHOOD				
	Prenatal ²	Newborn ³	3-5 d ⁴	By 1 mo	2 mo	4 mo	6 mo	9 mo	12 mo	15 mo	18 mo	24 mo	30 mo
HISTORY Initial/Interval	•	•	•	•	•	•	•	•	•	•	•	•	•

HEDIS requirements for compliancy is:

- **0 – 15 months:** member is compliant if seen 6 or more well child visits on different dates of services on or before the 15-month birthday
- **15 – 30 months:** member is compliant if seen 2 or more well –child visits on different dates between the 15-month plus 1- day and the 30-month birthday

WCV – Child and Adolescents Well Care Visits



Report three age stratifications and total rate:

- 3 – 11 years
- 12 – 17 years
- 18 – 21 years

A Member should be seen at least once a year for an Annual Well Visit

WCV – HEDIS Tips

Common issues and error identified for WCV:

- Provider documents “New Patient” and completed the exam. However, there is no CPT/ICD-10 code for initial comprehensive preventive E/M or diagnosis general/routine medical examination.
- Peach State Members with other health insurance(OHI); services billed to the primary carrier and “no claim submitted” to Peach State Health Plan
 - ✓ **To close the HEDIS care gap submit the patient’s medical record for the Well Child and Adolescent Visit.**

WCC – Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

The percentage of members 3–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year:

- BMI Percentile documentation*
- Counseling for Nutrition
- Counseling for Physical Activity

*Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than an absolute BMI value.



WCC – HEDIS Tips

Body Mass Index (BMI)

Document the members age, weight, height and BMI percentile

Use the appropriate ICD-10- CM code for BMI percentile to close HEDIS care gap:

- › Z68.51
- › Z68.52
- › Z68.53
- › Z68.54

Counseling Nutrition

Document the discussion about current nutrition behaviors, counseling or referral for nutrition education, and material provided face-to-face visit

Use the appropriate ICD-10- CM code for Nutrition Counseling to close HEDIS care gap:

- › Z71.3

Counseling for Physical Activity

Document the discussion of current physical activity behaviors

Document the “Active or Activity” when it relates to the patient's physical activity level

Use the appropriate ICD-10-CM code for Physical Activity Counseling:

- › Z71.82

Note: ICD-10-CM Z71.89 will not close the HEDIS Care Gap

CIS – Childhood Immunization Status



Children 2 years of age who had the following by their second birthday during the MY:

- Four (4) DTaP (diphtheria, tetanus and acellular pertussis)
- Three (3) IPV (polio)
- One (1) MMR (measles, mumps and rubella)
- Three (3) HiB (haemophilus influenza type B)
- Three (3) HepB (hepatitis B)
- One (1) VZV (chicken pox)
- Four (4) PCV (pneumococcal conjugate)
- One (1) HepA (hepatitis A)
- Two (2) or Three (3) RV (rotavirus)
- Two (2) FLU (influenza)
- **The measure calculates a rate for each vaccine and three combination rates:**
 - › **COMBO 3**
 - › **COMBO 7**
 - › **COMBO 10**

Combination Vaccinations for Childhood Immunization Status – CIS

Combination	DTaP	IPV	MMR	HiB	HepB	VZV	PCV	HepA	RV	Influenza
COMBO 3	✓	✓	✓	✓	✓	✓	✓			
COMBO 7	✓	✓	✓	✓	✓	✓	✓	✓	✓	
COMBO 10	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

CIS – HEDIS Tips

Common issues and error identified for CIS:

- **Hepatitis-B:** 1st dose is usually administered in the hospital. Often no claim is submitted if patient does not have a Medicaid ID#.
 - ✓ **Submit patient medical record reflecting 1ST dose for Hepatitis- B to close HEDIS care gap.**
- If 4th dose of DTaP or Pneumococcal is administered after 2nd birthday the member is considered **non-compliant for CIS HEDIS measure**
- Peach State Members with other health insurance(OHI); services billed to the primary carrier and **“no claim submitted”** to Peach State Health Plan
 - ✓ **To close the HEDIS care gap submit the patient’s medical record reflecting the name of the vaccines administered with date of service.**

CIS – HEDIS Measure Codes

CIS Follows the CDC Advisory Committee on Immunization Practices (ACIP) guidelines for children	
VACCINE	CPT
DTaP (Diphtheria, Tetanus and acellular Pertussis)	90700
IPV (Polio)	90713
MMR (Measles, Mumps, Rubella)	90707
HiB (Haemophilus influenza type B)	90647
HiB 4 DOSE	90648
HepB 3 DOSE - IMMUNOSUPPRESSED	90740
HepB (Hepatitis B)	90744
HepB DIALYSIS OR IMMUNOSUPPRESSED 4 DOSE	90747
VZV (Varicella Zoster Virus)	90716
PCV13 (Pneumococcal Conjugate)	90670
HepA (Hepatitis A)	90633
RV (Rota Virus) 2 DOSE (Rotarix)	90681
RV (Rota Virus) 3 DOSE (Rota Teq)	90680
FLU - TRIVALENT 0.25ML	90655
FLU - TRIVALENT 0.25ML	90657
FLU – Quadrivalent (IIV4), split virus, preservative free, 0.25mL dosage, IM	90685
FLU – Quadrivalent (IIV4), split virus, 0.5 mL dosage, IM	90688

CIS – HEDIS Measure Codes

CIS
Follows the CDC Advisory Committee on Immunization Practices (ACIP)
guidelines for children

VACCINE (Combination)	CPT
DTaP-IPV/HiB combo	90698
DTaP-HepB-IPV	90723
DTaP- IPV-HiB-HepB	90697
MMRV (Measles, Mumps, Rubella, Varicella)	90710
HiB/HepB	90748

Codes are subject to change

Note: Use the appropriate ICD-10-CM codes and Modifiers applicable for billing

IMA – Immunization for Adolescents



Adolescents 13 years of age who had the following by their thirteenth birthday during the MY:

- One (1) **MCV** (Meningococcal) between **11th – 13th birthday**
- One (1) **Tdap** (Tetanus, Diphtheria, Acellular Pertussis) between **10th – 13th birthday**
- Three (3) **HPV** (Human papillomavirus) between **9th – 13th birthday** or two (2) **HPV** with at least **146 days** between **1st** and **2nd dose**
- The measure calculates a rate for each vaccine and two combination rates.
 - › **COMBO 1**
 - › **COMBO 2**

Combination Vaccinations for Immunization for Adolescents – IMA

Combination	MCV	Tdap	HPV
COMBO 1	✓	✓	
COMBO 2	✓	✓	✓

IMA – HEDIS Tips

Common issues and error identified for IMA:

- HPV vaccine administered after 13th birthday
 - ✓ Schedule patient for 2nd HPV dose for 6 months instead 1 year or within the 146 days window
 - **Recommend a catch-up/shot only visit for patients who are turning 13 years old**
 - ✓ Proper coding is essential to closing the care gap

IMA – HEDIS Measure Codes

IMA	
Follows the CDC Advisory Committee on Immunization Practices (ACIP) guidelines for children	
VACCINE	CPT
Meningococcal conjugate vaccine, serogroups A, C, W, Y, quadrivalent, diphtheria toxoid carrier (MenACWY-D) or CRM197 carrier (MenACWY-CRM), for intramuscular use	90734
Meningococcal polysaccharide vaccine, serogroups A, C, Y, W-135, quadrivalent (MPSV4), for subcutaneous use	90733
Tdap Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap), when administered to individuals seven (7) years or older, for intramuscular use	90715
HPV vaccine, types 6, 11, 16, 18 Quadrivalent (4vHPV) three (3) dose for IM (intramuscular)	90649
HPV vaccine, types 16, 18, Bivalent (2vHPV), three (3) dose schedule for IM (intramuscular)	90650
HPV vaccine, types 6, 11, 16, 18, 31, 33, 45, 52, 58, Nonavalent (9vHPV), three (3) dose schedule, for IM (intramuscular)	90651

Codes are subject to change

Note: Use the appropriate ICD-10-CM codes and Modifiers applicable for billing



Sick Visit and Sports Physical during Well – Child & Adolescent Visits

EPSDT Periodic Visit and Sick Visit Same Day

If a patient presents with an abnormality(ies) or a preexisting problem during the EPSDT Periodic visit and it is significant enough to require additional work; perform the key components of a problem-oriented E/M (evaluation and management) service, using the following:



Appropriate Codes for EPSDT and Sick Visit Same Day

New Patient: EPSDT Periodic Visit and Sick Visit on Same Day

Description	CPT Code	ICD-10 CM Codes
Preventive Visit	99381-99385 Modifier: EP	Z00.110, Z00.111, Z00.121, Z00.129, Z00.00, Z00.01, Z02.0 – Z02.89
E/M – Office/Outpatient Visit	99211 or 99212 Modifier: 25	*Use applicable diagnosis code for a sick visit

Established Patient: EPSDT Periodic Visit and Sick Visit on Same Day

Description	CPT Code	ICD-10 CM Codes
Preventive Visit	99391-99395 Modifier: EP	Z00.110, Z00.111, Z00.121, Z00.129, Z00.00, Z00.01, Z02.0 – Z02.89
E/M – Office/Outpatient Visit	99211 or 99212 Modifier: 25	*Use applicable diagnosis code for a sick visit

For guidelines reference Department of Community Health: EPSDT Services—Health Check Program Manual for additional information www.mmis.georgia.gov

Sports Physical and Well Child Visit

Peach State Health Plan will reimburse our primary care providers (PCPs) for performing Sports Physical for our members 8 – 18 years old when the well-check screening service is performed on the same date of service or for members who are current on their EPSDT Periodic health screening.

- If the member is scheduled for a Well Child Visit and needs a Sports Physical Exam on the same day report the following when submitting a claim



Appropriate Codes for Well Child Visit and Sports Physical Exam

Member requires both a Well Child Visit and Sports Physical Exam – Same Day

Description	CPT Code	ICD-10 CM Codes
Well Child Visit	99383-99385 or 99393-99395 Modifier: EP	Z00.121, Z00.129
Sports Physical Exam	99212 Modifier: 25	Z02.5

- If the member is up-to-date with their EPSDT Periodic Health Screening perform a Sports Physical Exam and submit a claim with appropriate codes

Sports Physical Exam only for members up-to-date with EPSDT Periodic Health Screening

Description	CPT Code	ICD-10 CM Codes
Sports Physical Exam	99212 Modifier: 25	Z02.5

Note: This is a Peach State Health Plan Value Added Benefit subject to change

Helpful Reminders

1) Billing with Wrong CPT or ICD-10 codes

- Well –child visits CPT and ICD-10 codes may have age range specifics; driving claims payment and HEDIS Care Gap closure. **EP** modifier is required when billing Well – Child visits.

2) Lack of documentation

- Not documenting appropriately within the chart/EMR. Submission of medical records to the health plan with missed information, will report as non-compliant for **EPSDT Audit**.

3) Provider practice not updated on current Measurement Year (MY) - HEDIS Measure requirements

- HEDIS MY is subject to change each year; it is imperative the provider staff/Quality coordinators are up-to-date with NCQA standards in closing key HEDIS measures

4) Using Bright Futures Tools in conjunction with HEDIS requirements

- In an effort for the providers office to use Bright Futures – “Best Practice”; they must understand the requirement of HEDIS to avoid mis-opportunities resulting in non-compliance

5) For more information see the **DCH- EPSDT Healthcheck Policies and Procedures Provider Manual** located on www.mmis.georgia.gov website.



Questions?
Thank You for Participating