



Early Periodic Screening and Development (EPSDT) Well – Child and Adolescent Visits HEDIS Tips



Improving Quality Outcomes

Line of Business:
Medicaid,
Marketplace

WELL CHILD VISITS IN THE FIRST 30 MONTHS OF LIFE (W30)

Measure Description

Members who had the follow number of Well-Child visits with a PCP during the last 15 months.

Two rates are reported:

- 1. Well-child visits in the first 15 months
 - Children who turned 15 months old during the measurement year; having 6 or more well- childvisits
- 2. Well-child visits for age 15 months 30 months
 - Children who turned 30 months old during the measurement year; having 2 or more well-childvisits

Timeline for Well-Child Visits				
3 -5 days old	6 months	18 months		
1 month	9 mo nths	24 months		
2 months	12 months	30 months		
4 months	15 months			

Helpful Tips

The following criteria meet HPV HEDIS standards:

- EPSDT preventive visits that occur at 15 months and 1 day old, will NOT count towards W30 O -15months HEDIS care gap outcomes
- Members 0 through 30 months should receive preventive visits throughout the year according tospecified timeframe
- Perform a well-visit exam during sick-visit or follow-up when medically appropriate

🔛 CHILD AND ADOLESCENT WELL-CARE VISITS (WCV)

Measure Description

Members 3 -21 years of age who had a least 1 comprehensive visit Well-Care visit with a PCP or OB/GYN practitioner during the measurement year.

Key components of comprehensive Well-Care Visits includes:

- Health History
- Physical developmental history
- Mental developmental history
- Physical Exam
- Health education/anticipatory guidance

Helpful Tips

- During every visit, it is important to discuss weight, BMI nutrition counseling, and the importance of physical activity. Make sure to document each element.
- Perform well-care visits during a sports physical visit. Use appropriate CPT and ICD-10 codes to ensure HEDIS care gap
- A handout given to a parent without documentation of a discussion does not meet the criteria for health education/ anticipatory guidance.

Appropriate Codes for W30 and WCV HEDIS Measure					
Age	CPT Codes New Patient	Age	CPT Codes Established Patient	Modifier	
Age 1 year	99381	Age 1 year	99391		
Age 1-4	99382	Age 1-4	99392		
Age 5-11	99383	Age 5-11	99393	EP	
Age 12-17	99384	Age 12-17	99394		
Age 18-21	99385	Age 18-21	99395		
ICD -10 Codes with Age					
Ages			Codes		
0-7 days			Z00.110		
8-28 days			Z00.111		
29 days-14 years			Z00.121 or Z00.129		
15 years-17 years			Z00.121 or Z00.129		
			Z00.00 or z00.01		
0-20 years			Z02 – Z02.89		

Codes subject to change

WEIGHT ASSESSMENT AND COUNSELING FOR NUTRITION PHYSICAL ACTIVITY FOR CHILDREN/ ADOLESCENTS (WCC)

Measure Description

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

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

Appropriate Codes for WCC HEDIS Measure					
Description and Codes					
BMI percentile (2 – 20 years of age)	Nutrition Counseling	Physical Activity Counseling			
ICD-10 – Codes	CPT – Codes	ICD -10 – Codes			
» Z68.51	» 97802	» Z02.5			
» Z68.52	» 97803	» Z71.82			
» Z68.53	» 97804	HCPCS – Codes			
» Z68.54	HCPCS – Codes	» G0270, G0271, G0447,			
	» G0270, G0271, G0447, S9449, S9452, S9470				

Codes subject to change

Helpful Tips

- During every visit, it is important to discuss weight, BMI nutrition counseling, and the importance of physical activity. Make sure to document each element.
- Documentation must include patient's height, weight, and BMI percentile notated in the medical record or plotted on a BMI age growth chart.
- During a sick visit use as an opportunity perform education on physical activity, nutrition counseling, and BMI percentile calculations.
- Use appropriate CPT/ICD-10 codes to ensure HEDIS care gaps outcomes. This reduces medical record/chart review.

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