

Well-Child Visits in the First 30 Months of Life (W30)

Measure Description

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

Note: The well-child visit must occur with a PCP, but the PCP does not have to be the practitioner assigned to the child.

Product Lines: Commercial, Medicaid, Exchange

Codes Included in the Current HEDIS® Measure

Description	Code
Well Care Visits	CPT: 99381-99385, 99391-99395, 99461 HCPCS: G0438, G0439, S0302, S0610, S0612, S0613
Encounter for Well Care	ICD-10: Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z00.3, Z01.411, Z01.419, Z02.5, Z02.84, Z76.1, Z76.2 Note: Do <i>not</i> include laboratory claims (POS 81).

Ways Providers can Improve HEDIS® Performance

- Take advantage of every office visit (including sick visits) to provide a well-child visit, immunizations, and lead testing.
- Turn daycare physicals into well-care visits by performing the required services and submitting appropriate codes.
- Medical record details should include, but not limited to, growth charts, well-child visit forms, health history and physical, sports or school physical forms and vitals sheet.
- Educate parents on the importance of preventive care visits.
- Schedule visits within the recommended time frames.
- Follow the American Academy of Pediatrics Bright Future, periodicity schedule available online at www.aap.org

Ways Health Plans can Improve HEDIS® Performance

- Educate parents on the importance of preventive care visits using culturally and linguistically appropriate language.
- Encourage parents/patients to maintain the relationship with a PCP to promote consistent and coordinated health care.
- Assist members with scheduling visits within the recommended time frames.
- Audit, identify, and educate the top 10 providers with needed services.
- Institute a member incentive for well-child visits in the first 30 months.
- Consider value added benefits for members to incentivize gap closure such as groceries or diapers.
- Include W30 in value-based arrangements with providers.

Required Exclusions

- Members who use hospice services or elect to use a hospice benefit any time during the measurement year.
- Members who die any time during the measurement year.

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