

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

Measure Description

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

- **BMI percentile documentation.** Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than an absolute BMI value.
- **Counseling for nutrition documentation** or referral for nutrition education.
- **Counseling for physical activity documentation** or referral for physical activity.

Product Lines: Commercial, Medicaid, Exchange

Codes Included in the Current HEDIS® Measure

Description	Code
BMI Percentile <5% for age	ICD-10: Z68.51
BMI Percentile 5% to <85% for age	ICD-10: Z68.52
BMI Percentile 85% to <95% for age	ICD-10: Z68.53
BMI Percentile ≥95% for age	ICD-10: Z68.54
Nutrition Counseling	CPT: 97802-97804 ICD-10: Z71.3 HCPCS: G0270, G0271, G0447, S9449, S9452, S9470
Physical Activity Counseling	ICD-10: Z02.5, Z71.82 HCPCS: S9451, G0447

Ways Providers can Improve HEDIS® Performance

- Use appropriate HEDIS codes to reduce the need for medical record review.
- Take advantage of every office visit (including sick visits and sports physicals) to capture BMI percentile, counsel on nutrition and physical activity.
- Place BMI percentile charts near scales.
- **BMI percentile documentation:**
 - This includes height, weight, and percentile. Reporting the BMI number alone is not considered proper documentation for this measure
- **Counseling for nutrition documentation:**
 - Current nutrition behaviors (e.g., meal patterns, eating and dieting habits).
 - Use a checklist that notates nutrition was addressed.
 - Provide counseling or refer to nutrition education.
 - Document that children/teens received nutritional educational materials during the visit and highlight anticipatory guidance.
 - Document weight or obesity counseling.
 - Documentation of a referral to nutritional education/ Women, Infants, and Child (WIC) services does meet criteria.
 - Documentation related to a member's appetite does not meet criteria.
- **Counseling for physical activity documentation:**

- Use a checklist that notes that physical activity was addressed.
- Physical activity counseling/education (e.g., child rides tricycle in yard).
- Discussion of current physical activity behaviors (e.g., exercise routine, participation in sports activities and exam for sports participation).
- While “cleared for sports” does not count, a sports physical does count.
- Include specific mention of physical activity recommendations to meet criteria for notation of anticipatory guidance.
- Document weight or obesity counseling.
- Document that children/teens received physical activity educational materials during the visit.

Ways Health Plans can Improve HEDIS® Performance

- Educate parents on the importance of preventive care visits (including nutrition and physical activity counseling) using culturally and linguistically appropriate language.
- Assist members with scheduling visits within the recommended time frames.
- Ensure providers understand the documented components needed to close the gap for this measure including appropriate billing codes
- Audit, identify, and educate the top 10 providers with needed services
- Institute a member incentive for WCC
- Consider value added benefits for members to incentivize gap closure such as a bicycle and helmet or groceries
- Include WCC 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 period.
- Members who die any time during the measurement year.
- Members who have a diagnosis of pregnancy any time during the measurement year. Do not include laboratory claims (POS: 81).

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Updated 12/10/2024.

