

2023 Quality Measure Highlight

Well-Child Visits and Related Services

Alameda Alliance for Health (Alliance) values our dedicated provider partner community, and we are here for you. We are sharing the 2023 Quality Measure Highlight: Well-Child Visit and Related Services to provide a snapshot of the Healthcare Effectiveness Data and Information Set® (HEDIS®) technical specifications and suggested best practices to meet the measure.

For more information, please contact the Alliance Quality Improvement Department at deptQIteam@alamedaalliance.org.

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

Measure Description: This measure includes two (2) separate rates based on age groups:

- The percentage of members **who turned 15 months during the measurement year** and had **six (6) or more well-child visits** with a primary care provider (PCP) by their 15-month birthday.
- The percentage of members **who turned 30 months during the measurement year** and had **two (2) or more well-child visits** with a PCP between the 15-month birthday plus one (1) day and the 30-month birthday.

Important things to note:

- A visit that occurs on the 15-month birthday can only count toward the 0–15-month rate.
- Per HEDIS® specifications, visits must be at least 14 days apart to count for this measure.
- To calculate the **15-month birthday**, add 90 days to the date of the first birthday.
- To calculate the **30-month birthday**, add 180 days to the date of the second birthday.

Exclusions: Members who were in hospice or died at any time during the measurement year.

Periodicity Schedule

The Bright Futures Periodicity Schedule indicates services that are needed at each check-up. Their recommendations include more visits than required by the National Committee for Quality Assurance (NCQA) measure specifications. Following these recommendations will help ensure the minimum number of required visits is met.

	Age	Visits	Developmental Screening	Social and Behavioral Screening	Immunization	Lead Screening	Fluoride Varnish*
Infancy	Newborn	●		●	●		
	3-5 days	●		●	●		
	1 month	●		●	●		
	2 months	●		●	●		
	4 months	●		●	●		
	6 months	●		●	●	★	
	9 months	●	●	●	●		
Early Childhood	12 months	●		●	●	●	
	15 months	●		●	●		
	18 months	●	●	●	●	★	
	24 months	●		●	●	●	
	30 months	●	●	●	●		↓

*Fluoride varnish should be applied every three (3)-six (6) months.

Visits:

- = To be performed ★ = Risk assessment to be performed with appropriate action to follow, if positive
- ← → = range during which a service may be provided

Measures Related to Additional Services

Additional measures that can be met while performing well-child visits:

Childhood Immunization Status (CIS): The percentage of children two (2) years of age who had by their second birthday, the following number of vaccine doses.

DTap <i>Diphtheria, tetanus, acellular pertussis</i>	Four (4)	HepB <i>Hepatitis B</i>	Three (3)	MMR <i>Measles, mumps, rubella</i>	One (1)
Flu <i>Influenza</i>	Two (2)	HiB <i>Haemophilus influenza type B</i>	Three (3)	PCV <i>Pneumococcal conjugate</i>	Four (4)
HepA <i>Hepatitis A</i>	One (1)	IPV <i>Polio</i>	Three (3)	VZV <i>Chickenpox</i>	One (1)
RV <i>Rotavirus</i>	2-Dose or 3-Dose series The number of required doses depends on the specific vaccine product that is used for each dose.				

Developmental Screening in the First Three Years of Life (DEV): The percentage of children screened for risk of developmental, behavioral, and social delays by their first, second, or third birthday during the measurement year.

Lead Screening in Children (LSC): The percentage of children two (2) years of age who had one (1) or more lead blood tests for lead poisoning by their second birthday.

Topical Fluoride for Children (TFL): The percentage of children ages one (1) through 20 who received at least two (2) topical fluoride applications within the measurement year.

Best Practices

- Electronic Medical Record (EMR)/Electronic Health Record (EHR): Use pre-built templates for immunizations, developmental screening, lead screening, and fluoride varnish treatments.
- Outreach: Develop a robust process with scripting and reminder calls/texts.
- Schedule follow-up appointments upon discharge or include them in the member outreach list, especially for 0-15 months visits.
- Well-Visits:
 - Use every opportunity to complete well-visits (i.e., sick visits, telehealth appointments).
 - Allow well-child visit scheduling for up to six (6) months.
 - Offer back-to-back sibling well-visits to help streamline appointments for busy families.

References

Bright Futures Periodicity Schedule:

www.aap.org/en/practice-management/bright-futures/bright-futures-in-clinical-practice/get-to-know-bright-futures-guidelines-and-core-tools

CDC Child and Adolescent Immunization Schedule by Age:

www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html

Catch-up Immunization Schedule for Children and Adolescents Who Start Late or Who Are More than 1 Month Behind:

www.cdc.gov/vaccines/schedules/hcp/imz/catchup.html

APL 23-016: Directed payments for developmental screening services:

www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPsandPolicyLetters/APL2023/APL23-016.pdf