



Measure Highlight: Well Care-Visits for Ages 3-21

Outline

1) Introduction

2) Measure Descriptions

- a) What Counts for HEDIS®

- b) Best & Promising Practices

3) Resources

Why Focus on Preventative Screening

- CA Governor Newsom's focus: preventive health for children
- DHCS increased accountable measures related to children
- **DHCS's Bold Goals:**
 - Close racial/ethnic disparities in well-child visits and immunizations by 50%.
 - Ensure all health plans exceed the 50th percentile for all children's preventive care measures.

Focus Measures

- Well-Child Visits, ages 3-21 (WCV)
- Initial Health Appointment (IHA)
- Immunizations for Adolescents – Combination 2 (IMA-2)
- Topical Fluoride for Children (TFL-CH)

Why Well-Care Visits?

- Monitor child's growth & development.
- Provides opportunity for vaccinations, screenings, applications, and other important resources.
- Early detection of health concerns.
- Monitoring chronic conditions.
- Preventative Care – guidance on nutrition, exercise and safety measures.
- Parental guidance and education.
- Builds a relationship with Healthcare Providers.

Measure Descriptions

Definitions, Billing Codes, HEDIS® Practices, and
Best & Promising Practices

Child and Adolescent Well-Care Visits (WCV)

% of children, 3-21 y/o, who had **at least one (1) comprehensive well-care visit** with a **primary care provider (PCP)** or an **obstetrics and gynecology (OB/GYN) practitioner** during the measurement year.

What counts for HEDIS®?

- ▶ One (1) well-care visit must occur annually; does not have to be an exact 365 days from the previous well-care visit.
- ▶ Well-care visit must be conducted by a PCP or OB/GYN

Reminder:

- ▶ All well-care visits are reimbursed in this age range.
- ▶ Telehealth is no longer counts for HEDIS
- ▶ PCP who performs the well-care visit does not have to be the member's assigned PCP.

Best & Promising Practices for WCV

- ▶ Electronic Medical Record (EMR)/Electronic Health Record (EHR): Use pre-built templates for immunizations, depression screening, and weight assessment and counseling.
- ▶ 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.
- ▶ Use the Bright Futures periodicity schedule and the CDC immunization schedule to keep track of milestones and services needed at each check-up.
- ▶ Text Messaging: Leverage text messaging programs for reminders to schedule their annual well-visits, as well as appointment reminders

Best & Promising Practices for WCV Alliance ALAMEDA FOR HEALTH

(cont.)

Well-Visits:

- ▶ 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.
- ▶ Use every opportunity to complete well-visits (i.e. sick visits).

Initial Health Appointments (IHA)

Requirements

- Complete within 120 days of provider assignment.
- Excludes members who completed an IHA within 12 month prior to provider assignment.
- Requires a minimum of 2 documented outreach attempts.

Telehealth Counts Towards IHA

- Place of Service Code 02 or Modifier 95.

Elements

- A history of the Member's physical and mental health
- An identification of risks
- Preventative Services – recommended by USPSTF
- Health education
- The diagnosis and plan for treatment of any diseases

CPT Codes that qualify for IHA

Provider	Codes	Description
Behavioral Health	96156	Health behavior assessment, or re-assessment (i.e., health-focused clinical interview, behavioral observations, clinical decision making)
OB/Gyn	59400, 59425, 59426, 59430, 59510, 59610, 59618 Z1000, Z1008, Z1020, Z1032, Z1034, Z1036, Z1038	Under vaginal delivery, antepartum and postpartum care procedures, under cesarean delivery procedures, under delivery procedures after previous cesarean delivery, under delivery procedures after previous cesarean delivery
PCP (new patient)	99202-99205, 99461 Z1016	Office or other outpatient visit for the evaluation and management of new patient
	99381-99387	Comprehensive preventive visit and management of a new patient
PCP (established patient)	99211-99215 Z00.01, Z00.110, Z00.111, Z00.8, Z02.1, Z02.3, Z02.5	Office or other outpatient visit for the evaluation and management of an established patient with PCP but new to the Alliance
	99391-99397	Comprehensive preventive visit and management of an established patient with PCP but new to the Alliance

Immunizations for Adolescents

Combination 2 (IMA-2)

% of adolescents, 13 y/o, who had the following vaccine doses by their **thirteenth birthday**:

Vaccine	What counts for HEDIS®
Tdap Tetanus, diphtheria acellular pertussis	At least one (1) Tdap vaccine with a date of service on or between the member's 10th and 13th birthdays.
Meningococcal Meningococcal serogroups A, C, W, Y	At least one (1) meningococcal serogroups A, C, W, Y vaccine, with a date of service on or between the member's 11th and 13th birthdays.
HPV Human papilloma virus	Two Dose Vaccine: At least two (2) vaccines on or between the member's 9th and 13th birthdays with different dates of service at least 146 days apart. <u>OR</u> Three Dose Vaccine: At least three (3) vaccines on different dates of service at least 14 days apart and on or between the member's 9th and 13th birthdays.

IMA-2 and CAIR

California Immunization Registry (CAIR)

- Bill AB 1797: Providers who administer vaccines are required to enter immunization information into CAIR.
- Instruction: Enter historical vaccines, whether given by your site or by another provider, into CAIR.
- Purpose: To support assessment of health disparities in immunization coverage.
- CAIR Resources:
 - CAIR FAQ on AB 1797:
<https://www.cdph.ca.gov/Programs/CID/DCDC/CAIR/Pages/AB1797-Registry-FAQs.aspx>
 - CAIR User Guide:
<https://www.cdph.ca.gov/Programs/CID/DCDC/CAIR/Pages/CAIR-Training-Guides.aspx>

Topical Fluoride for Children (TFL-CH)

% of children, 1-20 y/o, who received **at least two (2)** topical Fluoride Varnish (FV) applications in the measurement year.

What counts for HEDIS®?

- ▶ Must have two (2) FV applications, in the Measurement Year, to count as completed.

Best & Promising Practices

- ▶ Conduct while patient is waiting for well-visit.
- ▶ Application can be conducted by Medical Assistants.
- ▶ Integrate billing code(s), for ages 1-5 y/o, into EMR/EHR: CPT 99188
 - ▶ Current Dental Terminology (CDT) Codes: D1206 or D1208; include proper taxonomy code for dental services.
 - ▶ FQHCs with Dental: Include dx Z29.3 when submitting claims to DHCS
- ▶ Refer patient to [Medi-Cal Dental](#).

Continued: Best & Promising Practices

- ▶ Promote oral health & FV application during Prenatal visits.
- ▶ Oral health education for staff and patients.

Alameda County Office of Dental Health

- ▶ Free Training
 - Phone: (510) 208-5910.
 - Email: dentalhealth@acgov.org

Alliance Incentive

- ▶ Details are forthcoming.
- ▶ Contact us: DeptQITeam@alamedaalliance.org

Resources

Equity Approaches

Approaches to Increase Access

- ▶ Review well-visit measure completion rate factors.
- ▶ Screen for health-related social needs.
- ▶ Design patient information to be culturally/linguistically appropriate.
- ▶ Involve patients and their family members in decision-making.
- ▶ Leverage shared decision-making, teach-back and motivational interviewing tools.
- ▶ Partner with local community resources.
- ▶ Utilize Community Health Workers (CHW).

Reports

- ▷ Gap in Care Lists
- ▷ HEDIS Measures
- ▷ Initial Health Appointment (IHA)
- ▷ Emergency Department Utilization

Project Support

Quality Improvement Team

- ▷ Project Management
 - Contact: DeptQITeam@alamedaalliance.org

We are here to help!

For any questions about program strategies or member incentives, please email deptQlteam@alamedaalliance.org