

# HEDIS® Lunch and Learn

Weight Assessment and Counseling for Children and Adolescents

# HEDIS® News You can Use



# Monthly Webinars: 30 minutes, 1 HEDIS topic



Weight Assessment and Counseling for Children and Adolescents (WCC)



# Weight Assessment and Counseling for Children and Adolescents (WCC) - Criteria

# <u>Denominator</u> - Who is in the measure?

- Members who turn 3-17 years of age in the measurement year
- Had an outpatient visit with <u>a PCP</u> or OB/GYN in the measurement year

Hybrid Methodology (claims + chart review)

Does NOT have to be a well-child visit!



# Weight Assessment and Counseling for Children and Adolescents (WCC) – Criteria

# **Numerator** - What makes the member compliant?



### 1. BMI Percentile

- ✓ Coded/billed!
- ✓ 3 elements HT, WT AND BMI percentile
- ✓ <u>Must be BMI</u>

  <u>percentile</u>, NOT a

  BMI value
  - Can be charted as a percentile in the office note
  - Plotted on a BMI growth chart (NOT HT or WT charts)



### 2. Nutrition

- ✓ Coded/billed!
- Discussion/assessment of current nutrition behaviors
- Checklist indicating nutrition was addressed
- Counseling or referral for nutrition education
- Nutrition education material given & discussed
- Nutrition anticipatory guidance
- ✓ Weight or obesity counseling



## 3. Physical Activity (PA)

- ✓ Coded/billed!
- Discussion/assessment of current PA behaviors
- Checklist indicating PA was addressed
- ✓ Counseling or referral for PA
- ✓ PA education material given & discussed
- ✓ PA anticipatory guidance
- ✓ Weight or obesity counseling



# Weight Assessment and Counseling for Children and Adolescents (WCC)

## What does NOT make the member compliant/does NOT meet?



### **BMI Percentile**

- × BMI value only
- Only BMI percentile <u>code</u> <u>and descriptor</u> in chart (if chart review)
- Ht/Wt growth chart plots
- × Ranges ("85<sup>th -</sup> 95<sup>th</sup> percentile")
- Thresholds ("above 95<sup>th</sup> percentile")
- × Incorrect BMI% plotting



### **Nutrition**

- Nutrition status only related to acute or chronic illness
- Documentation regarding diet related medication side effects (i.e., ADHD medication)
- Documentation related to appetite
- Physical exam findings (i.e., "well-nourished"
- Nutrition education related to acute illness (i.e., "BRAT diet")



## **Physical Activity**

- Screen time without specific mention of physical activity
- Education related solely to safety (i.e., "wear bike helmet")
- Physical activity status only related to acute or chronic illness
- Notation of "cleared for gym"
- Documentation related only to development milestone (i.e., "able to ride a bike")



# **WCC - Coding**

\*Critical to compliance\*

### **BMI Percentile**

• ICD-10 CM: Z68.51-Z68.54

### **Counseling for Nutrition**

- ICD-10 CM: Z71.3
- CPT: 97802-97804
- HCPCS: G0270, G0271, G0447, S9449, S9452, S9470

## **Counseling for Physical Activity**

- ICD-10 CM: Z02.5, Z71.82
- HCPCS: G0447, S9451

### **CODING....**

- ✓ Increases your HEDIS rates!
  - ✓ Decreases chart review!



# **Challenges**Why Gaps in Care?



#### **BMI Percentile**

- Not coded/billed
- If not coded and must review chart, only BMI percentile code descriptor documented
- BMI value only, ranges or thresholds only
- No EMR auto calculate or plot
- BMI plot missing, blank or does not match DOS info
- EPSDT Form limitations
- BMI% not a printable field



- Not coded/billed
- Documentation solely related to acute or chronic condition
- Documentation solely related to medication side effects
- Nutrition on EPSDT form not addressed (and not found in office note)



## **Physical Activity**

- Not coded/billed
- Documentation solely related to acute or chronic condition
- Physical Activity on EPSDT form not addressed (and not found in office note)
- 3–4-year-olds often missing Physical Activity! Completely missing or vaguely charted playtime
- Screen time only



# **Take-Away Actions- WCC**

Be sure EMR system automatically

Plots the BMI% or populates BMI% in office note

Check EMR system to be sure

BMI Percentile is a printable field

## **CODING**

This is the best way to ensure compliance!

Remember there are codes available to capture

Decreases chart review!

Supplemental data feed

Year Round MRR

For paper

charting, plot

on the BMI

growth chart

Or document

BMI% in the

office note

Assess and document

Current nutrition and physical activity behaviors Be sure BMI
percentile <u>code</u> and <u>descriptor</u> is NOT the ONLY documentation in the chart

BMI percentile must be documented in note or plotted

Document
anticipatory
guidance SPECIFIC
to nutrition &
physical activity

Versus notation of "anticipatory guidance given"

# **Take-Away Actions-WCC**

Be sure nutrition education is not solely related

To acute or chronic illness or medication side effects

Remember the WCC measure is for 3-17-year-olds

Don't forget the younger ages!

Consider
addressing
BMI%, nutrition
and physical
activity
counseling

At any visit, not just well-child

Be sure physical activity education is not solely

**Related to safety** 

Document
anticipatory
guidance
specific to
physical activity

And not limited to screen time

Completely fill out nutrition and physical activity

**On EPSDT Form** 

(Be sure using most recent versions)

Partner with
ABHWV QM for
well-child event
\$25 gift card
Creative to meet
your needs

# ABHWV website Provider HEDIS Section

There is now a HEDIS tab within the Provider Tab on the ABHWV website. The following are now available:

- 1. What is HEDIS? a short description of HEDIS
- 2. **HEDIS News You Can Use** –emailed to providers each month and will be available on the website, including current and prior months
- 3. **HEDIS Toolkit For Provider Offices** comprehensive document of all HEDIS measures, including a coding/billing section. This is updated annually or sooner as needed.
- **4. HEDIS Lunch and Learn Webinars For Providers** monthly webinars such as the one today. Links for past webinars and invite information for the next upcoming Lunch and Learn will be here.

https://www.aetnabetterhealth.com/westvirginia/providers/hedis.html



# **Closing Thoughts and Resources**

# Members trust you!

Parents/caregivers/patients consider you their most trusted source of medical information.

Your guidance and encouragement is critical in their health management.

Allow time for discussion and questions. Hearing your answers can help parents/caregivers/patients feel more confident and comfortable.

# **ABHWV Quality Partnerships**

### Melani McNinch, ABHWV Quality HEDIS Manager

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#### **Event Partnering**

**David Roberts** 

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### **EMR** data file transfer options

#### **Tosha Morris**

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# Other Resources

#### **Great Resources:**

https://brightfutures.aap.org/mat erials-and-tools/guidelines-andpocket-guide/Pages/default.aspx

https://dhhr.wv.gov/HealthCheck/providerinfo/Pages/default.aspx

https://dhhr.wv.gov/HealthCheck /providerinfo/Documents/2021\_H C\_PeriodicitySschedule.pdf

https://www.aap.org/en/search/?
context=all&k=obesity

https://dhhr.wv.gov/wvchildhoodl eadpoisoning/Pages/EPSDT-Well-Child-Forms.aspx





# \* aetna®