

## HEDIS® Lunch and Learn Well-Child Visits

**Sherry Griffith RN, BSN** 

©2024 Aetna Inc. June 2024

# HEDIS® News You can Use



### Monthly Webinars: 30 minutes, 1 HEDIS topic



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



# Well-Child Visits in the First 30 months of Life (W30) - Criteria

#### What makes a member compliant?

Members who had the following number of well-child visits with a PCP:

- Well-Child Visits in the First 15 Months Children who turned 15 months old during the measurement year and had six or more well-child visits with a Primary Care Provider (PCP). The well-child visits must be received on or before the child turning 15 months old.
- Well-Child Visits for Age 15 Months 30 Months –
   Children who turned 30 months old during the measurement year and had two or more well-child visits with a Primary Care Provider (PCP) between 15 months and 30 months of age. The well-child visits must be received on or before the child turning 30 months old.





## Well-Child Visits in the First 30 months of Life (W30) - Coding

**CPT:** 99381-99385, 99391-99395, 99461

ICD-10 CM: Z00.00, Z00.01, Z00.110, Z00.111,

Z00.121, Z00.129, Z00.2, Z00.3, Z01.411,

Z01.419, Z02.5, Z76.1, Z76.2

HCPCS: G0438, G0439, S0302, S0610, S0612,

S0613



### Child and Adolescent Well-Care Visits (WCV)

#### Child and Adolescent Well-Care Visits (WCV)- Criteria

#### What makes a member compliant?

Members who are 3 to 21 years of age in the measurement year and received at least one comprehensive well-care visit with a Primary Care Provider (PCP) or an OB/GYN provider in the measurement year. **Four rates are reported:** 

- · 3-11 years
- · 12-17 years
- · 18-21 years
- · Total rate: 3-21 years







#### Child and Adolescent Well-Care Visits (WCV)- Coding

**CPT:** 99381-99385, 99391-99395, 99461

ICD-10 CM: Z00.00, Z00.01, Z00.110, Z00.111,

Z00.121, Z00.129, Z00.2, Z00.3, Z01.411,

Z01.419, Z02.5, Z76.1, Z76.2

HCPCS: G0438, G0439, S0302, S0610, S0612,

S0613

\*Aetna Better Health® of West Virginia will pay for a well visit outside of the 12-month cycle.



#### **Member Incentive Program:**



**\$25.00 Reward:** Members ages 12-21 who have a well-care exam completed during the calendar year.



## **Challenges**Why Gaps in Care?



- Measures captured via administrative methodology-no chart review during HEDIS season
- Well-child visits not billed/coded
- FQHC/RHC if T1015 on a claim does not include well-child codes
- Transportation barriers
- Volume of sick/acute illness, particularly in the W30 age groups
- CODING!
   Not billed = NON-COMPLIANT
- NICU after birth



- Belief "don't fix it unless it's broken"
- Does not understand need for well-care as well as sick care, not as high priority
- Insufficient understanding of early intervention
- Adolescents may not routinely present to the PCP office unless seeking care for illness or injury (18-21 least compliant)
- Social Determinants of Health, support system – there could be potential factor(s) impacting compliance
- UC/ER overutilization; services rendered during an inpatient or ED visits do NOT meet



- Limited office hours (after hours/weekends)
- If ABHWV is the secondary insurance, may not have a claim.
- Early visits after birth that can potentially be wellchild visits as recommended by AAP
- Missed opportunities –
  perform well-child at same
  time as sick visit when
  clinically feasible
- Not realizing ABHWV pays for well-visit outside 12month cycle



### Take-Away Actions-Well Child

Aetna Better Health®
of West Virginia will
pay for a well-child
visit
outside of the 12month cycle

**Best Practices** 

**CODING** 

Ensures compliance!

EMR Data Transfer feed

**YR MRR** 

Schedule next well visit at end of each appointment Automatic mailings, texts, emails or calls reminding parents to schedule yearly check ups

Member \$25 Incentive for ages 12-21

Promote ABHWV \$25 Reward

Sick visits (when clinically feasible) present an opportunity to complete a well-visit

Newborn and well weight check visits are also opportunities to capture well-care visits

Provider outreach via phone call, text or email with appointment reminders Sports physicals convert to well-care visit when feasible

## Take-Away Actions-Well Child cont.

FQHCs/RHCs- When billing a T1015 encounter code, it is essential to also list on the claim the actual CPT/HCPCS codes to identify services included in the encounter

**Best Practices** 

Take advantage of telehealth opportunities

Assess SDoH status/needs (identify potential barriers)

Well-care visits that are performed at school-based clinics

with any PCP may be counted if billed accordingly

Discuss the importance of healthy behaviors, immunizations

and the need for appropriate screenings

Help
parents/guardians
understand
difference
(and importance)

between going to doctor when sick vs. well Consider offering evening or weekend hours

to accommodate working parents and guardians

Partner with
ABHWV QM for
well-care event
\$25 gift card to
each member that
attends

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, Senior Mgr, ABHWV Quality HEDIS Manager

ABHWVHEDIS@aetna.com

Sherry Griffith, ABHWV Quality HEDIS
Project Manager

ABHWVHEDIS@aetna.com

#### **EMR** data file transfer and YR MRR options

Tosha Morris. HEDIS Project Manager

ABHWVHEDIS@aetna.com

304-348-2003

#### **Wellness Event Partnering**

David Roberts, Prevention & Wellness

ABHWVHEDIS@aetna.com

304-539-9046

#### **Quality Practice Liaison**

Alana Hoover

ABHWVHEDIS@aetna.com

860-900-6090

### 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/SiteAssets/Pages/PeriodicitySchedule/2023%20Periodicity%20Schedule%20-%20APPROVED%20rev1.11.24%20%281%29.pdf





## Paetna®