

# 2020 HEDIS Measure Tips



One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS® measures.

## Adolescent Well-Care Visits (AWC)

Utilization and Risk Adjusted Utilization HEDIS® Measure\*

### HEDIS measure description

The percentage of adolescents who had at least one comprehensive well-care visit with a primary care provider or an OB/GYN provider during the measurement year.

### Measure population (denominator)

Members ages 12 to 21 as of Dec. 31 of measurement year.

### Measure compliance (numerator)

Evidence of a comprehensive well-care visit with a PCP or OB/GYN provider during the measurement year.

Documentation of the visit in the medical record must include the date when the well-care visit occurred and evidence of **all** the following:

- Health history
- Physical developmental history
- Mental developmental history
- Physical exam
- Health education/anticipatory guidance

**Note:** This measure can only be met through appropriate coding and claims.

### Exclusions

- Members in hospice
- Members deceased during measurement year

### Helpful HEDIS hints

- Services provided during inpatient, emergency department or telehealth visits do not meet criteria.
- Preventive services may be rendered on visits other than well-child visits, but services that are specific to the assessment or treatment of an acute or chronic condition don't count toward the measure.

This measure applies to commercial members only.

*continued*

## Documentation is crucial:

- **Must** be completed by either a PCP or an OB/GYN provider.
  - PCP: physician, pediatrician, nurse practitioner or physician assistant who offers primary care medical services in settings such as general or family practice, internal medicine and pediatrics.
  - OB/GYN: physician certified as an obstetrician and gynecologist or who successfully completed an accredited program of graduate medical or osteopathic education in obstetrics and gynecology.
- **Health history:** assessment of the member’s medical history.
  - Notation of allergies, medications or immunization status **alone** would not count. However, if all three (allergies, medications, immunization status) are documented, this would meet criteria.
- **Physical developmental history:** developmental milestones and assessment of whether the adolescent is developing skills to become a healthy adult.
  - Notation of “appropriate for age” without specific mention of development or “well-developed/nourished/appearing” would **not** count.

**Note:** Documentation of “Tanner Stage/Scale” meets criteria for physical developmental history for this measure.
- **Mental developmental history:** developmental milestones and assessment of whether the adolescent is developing skills to become a healthy adult. Documentation of “behavior appropriate for age” meets criteria.
  - Notation of “neurological exam” or “well-developed” alone would not count.
- **Physical exam:** Vital signs alone or visits where care is limited to OB/GYN issues (e.g., prenatal or postpartum care) would not count.
  - The purpose of including visits with OB/GYNs is to allow that provider type to perform the adolescent well-care visit requirements.
- **Health education and anticipatory guidance:** given by the health care provider to the member and/or parents, guardians in anticipation of emerging issues that a member and family may face.
  - Handouts given during a visit without evidence of a discussion does not meet criteria.
  - Information given regarding medications or immunizations or their side effects would **not** count.

## Tips for coding

Codes to identify Well-Care Visits:

- ICD10CM: Z00.00, Z00.01, Z00.5, Z00.8, Z00.110, Z00.111, Z00.121, Z00.129, Z02.0-Z02.6, Z02.71, Z02.82, Z76.1, Z76.2
- CPT® codes\*\*: 99381-99385, 99391-99395, 99461
- HCPCS: G0438, G0439

## Resources

1. Centers for Disease Control and Prevention. 2019. “Information on Raising Healthy Children for Parents with Teens (Ages 12-19).” [cdc.gov/parents/teens/healthy\\_children.html](https://www.cdc.gov/parents/teens/healthy_children.html)
2. Centers for Disease Control and Prevention (CDC). 2014. “Youth Risk Behavior Surveillance — United States, 2013.” [cdc.gov/mmwr/pdf/ss/ss6304.pdf](https://www.cdc.gov/mmwr/pdf/ss/ss6304.pdf)

\* HEDIS®, which stands for Healthcare Effectiveness Data and Information Set, is a registered trademark of the National Committee for Quality Assurance, or NCQA.

\*\* CPT codes, descriptions and two-digit numeric modifiers only are copyright of the 2019 American Medical Association. All rights reserved.

No portion of this document may be copied without the express written permission of Blue Cross Blue Shield of Michigan, except that BCBSM participating health care providers may make copies for their personal use. In no event may any portion of this publication be copied or reprinted and used for commercial purposes by any party other than BCBSM. None of the information included herein is intended to be legal advice and, as such, it remains the provider’s responsibility to ensure that all coding and documentation are done in accordance with all applicable state and federal laws and regulations.