

2020 MCAS MEASURE: ADOLESCENT WELL-CARE VISITS (AWC)

Measure Steward: National Committee for Quality Assurance (NCQA)

Gold Coast Health Plan's (GCHP) goal is to help its providers gain compliance with their annual Managed Care Accountability Set (MCAS) scores by providing guidance and resources. This tip sheet will provide the key components to the MCAS measure, "Adolescent Well-Care Visits (AWC)."

Measure Description: Members ages 12-21 who had at least one comprehensive well-care visit with a Primary Care Provider (PCP) or an Obstetric / Gynecologic (OB/GYN) practitioner during the measurement year.

This measure requires evaluation by a medical provider and documentation of ALL five assessments during the measurement, which include:

Assessment	Description	Non-Compliant Documentation
Health History	An assessment of the member's history of disease or illness. This can include, but is not limited to, past illness (or lack of illness), surgery or hospitalization (or lack of surgery or hospitalization), and family health history.	Individual notation of only: <ul style="list-style-type: none"> Allergies Medications Immunization status
Physical Developmental History	Assesses specific age-appropriate physical developmental milestones and assessment of whether the adolescent is developing skills to become a healthy adult.	Notations of: <ul style="list-style-type: none"> "Appropriate for age" "Well-developed / nourished / appearing"
Mental Developmental History	Assesses specific age-appropriate mental developmental milestones and assessment of whether the adolescent is developing skills to become a healthy adult.	Notations of: <ul style="list-style-type: none"> "Appropriately responsive for age" "Neurological exam" "Well-developed"
Physical Exam	Physical (hands-on) face-to-face encounter. Must be comprehensive in nature addressing multiple body systems.	<ul style="list-style-type: none"> Vital signs only OB/GYN limited care topics (e.g., prenatal, postpartum care)
Health Education / Anticipatory Guidance	To be given by the health care provider to the member and/or parents or guardians in anticipation of emerging issues that a member and family may face. Discussions may include topics such as nutrition, safety / injury prevention, daily care / activity / sleep, and common developmental issues / problematic behaviors.	Information regarding medications or immunizations and their side effects.

Data Collection Method: Hybrid¹

Codes used to identify wellness visits with a PCP or OB/GYN.

Description	CPT	HCPCS	ICD-10-CM	SNOMED
Office / Outpatient Visits	99381-99385, 99391-99395			



Description	CPT	HCPCS	ICD-10-CM	SNOMED
Adolescent Wellness Exams		G0438 G0439	Z00.00, Z00.01, Z00.121, Z00.129, Z00.5, Z00.8, Z02.0, Z02.1, Z02.2, Z02.3, Z02.4, Z02.5, Z02.6, Z02.71, Z02.82, Z76.1, Z76.2	103740001, 170177007, 171387006, 171394009, 171395005, 171409007, 171410002, 171416008, 243788004, 268563000, 270356004, 410620009, 410644006, 410645007, 410646008, 410647004, 410648009, 410649001, 410650001, 444971000124105, 669251000168104, 669261000168102, 669271000168108, 669281000168106

Best Practices:

- ▶ Use the GCHP Performance Feedback Report to identify members with gaps in care.
- ▶ Make outreach calls and/or send letters to advise members / parents of the need for a visit.
- ▶ OB/GYN practitioners are allowed to perform the adolescent well-care visit requirements but it is not intended to allow care of limited OB/GYN topics as a substitution for well-care.
- ▶ Provide adolescent members with education in relation to how they relate to the world, as they undergo considerable physical, mental, sexual, social, and emotional changes.
- ▶ Providers should be mindful and understand the different stages of adolescence in order to promote healthy development into early adulthood.
- ▶ Educate parents of adolescent patients that this period of development can cause anxiety and change the dynamics for the young member and their family.
- ▶ Ensure your documentation is clear and concise.
- ▶ Use proper coding.

¹ Measures reported using the *hybrid* data collection method report on a sample of the eligible population (usually 411) and use both administrative and medical record data sources to evaluate if services were performed.