

2020 MCAS MEASURE: WELL-CHILD VISITS IN THE FIRST 15 MONTHS OF LIFE (W15)

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, *"Well-Child Visits in the First 15 Months of Life (W15)."*

Measure Description: Measures the percentage of members who turned 15 months old during the measurement year and who had six or more well-child visits with a PCP during their first 15 months of life.

This measure requires evaluation by a medical provider and documentation of all five assessments, which include:

Health History	An assessment of the patient's history of disease or illness. Health history 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.
Physical Developmental History	Assesses specific age-appropriate physical developmental milestones, which are physical skills seen in children as they grow and develop.
Mental Developmental History	Assesses specific age-appropriate mental developmental milestones, which are behaviors seen in children as they grow and develop.
Physical Exam	Physical (hands-on) face-to-face encounter. Must be comprehensive in nature and address multiple body systems.
Health Education / Anticipatory Guidance	Given by the health care provider to parents or guardians in anticipation of emerging issues that a child and family may face. Discussions may include topics such as nutrition, safety / injury prevention, daily care / activity / sleep, and common developmental issues / problematic behaviors.

Data Collection Method: Hybrid¹

Codes used to identify wellness visits with a PCP.

Description	CPT	HCPCS	ICD-10-CM	SNOMED
Office / Outpatient Visits	99381-99385, 99391-99395, 99461			
Well-Child Exams		G0438, G0439	Z00.110, Z00.111, Z00.121, Z00.129, Z00.5, Z00.8, Z02.0, Z02.2, Z02.5, Z02.6, Z02.71, Z02.82, Z76.1, Z76.2	103740001, 170099002, 170107008, 170114005, 170123008, 170250008, 170254004, 170263002, 170300004, 170309003, 171387006, 171409007, 171410002, 171416008, 171417004, 243788004, 268563000, 410620009, 410621008, 410622001, 410623006, 410624000, 410625004, 410626003, 410627007, 410628002, 410629005, 410630000, 410631001, 442162000, 444971000124105, 446301000124108, 446381000124104

Best Practices:

- ▶ Use the GCHP Performance Feedback Reports to identify members with gaps in care.
- ▶ Make outreach calls and/or send letters to advise members / parents of the need for a visit.
- ▶ Report correct preventive visit billing codes when services are provided and documented.
- ▶ Encourage scheduling appointments in advance.
- ▶ Pursue missed appointments with letters and reminder calls.
- ▶ When patients are seen for acute visits, take the opportunity to provide and document preventive services, when appropriate.
- ▶ Use alerts in the EMR system for outreach to members who are due for preventive services.
- ▶ Providers can review the Bright Futures [Periodicity Table](#) for recommended schedules of well-care visits.
- ▶ 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.