

2025 Measurement Year

MCAS MEASURE: WELL-CHILD VISITS IN THE FIRST 30 MONTHS OF LIFE (W30)

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 provides the key components to the MCAS measure, "Well-Child Visits in the First 30 Months of Life (W30)."

Measure Description: Measures the percentage of members who had the following number of well-child visits with a primary care provider (PCP) during the last 15 months. The following rates are reported:

- ▶ **Well-Child Visits in the First 15 Months.** Children who turned 15 months of age during the measurement year: Six or more well-child visits.
- ▶ **Well-Child Visits for Ages 15 Months to 30 Months.** Children who turned 30 months of age during the measurement year: Two or more well-child visits.

Data Collection Method: Administrative¹

W30 Clinical Code Sets

- For billing, reimbursement, and reporting of services completed, submit claims in a timely manner with the appropriate medical codes for all clinical conditions evaluated and services completed.

Codes used to identify well-care exams with a PCP.

| Description | ICD-10-CM | CPT | HCPCS |
|----------------|---|---|--|
| Well-Care Exam | Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z00.3, Z02.5, Z76.1, Z76.2, Z01.411, Z01.419, Z02.84 | 99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395, 99461 | G0438, G0439, S0302, S0610, S0612, S0613 |

Exclusion Criteria - Members with the following condition are excluded from the W30 measure:

- ▶ Members receiving hospice care during the measurement year.
- ▶ Members who die anytime during the measurement year.

Best Practices:

- ▶ Use the Inovalon® Provider Enablement Quality Gap Insights to identify members with gaps in care.
- ▶ Make outreach calls and/or send letters to advise members / parents of the need for a visit.
- ▶ Monitor patients via telehealth visits, as appropriate.
- ▶ 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 electronic medical record (EMR) system for outreach to members who are due for preventive services.
- ▶ Providers can review the Bright Futures [Periodicity Table](#) for a recommended schedule of well-care visits.
- ▶ GCHP offers free health education services, materials, classes, and online resources to help members achieve a healthy lifestyle. Providers can contact the Health Education Department or refer patients / guardians / caregivers to the following information:
 - Providers, call: 1-805-437-5961
 - Members, call: 1-888-301-1228 / TTY 1-888-310-7347
 - GCHP Health Education Webpage (resources in English and Spanish): [Click Here](#)

¹ Measures reported using the *administrative* data collection method report on the entire eligible population and use only administrative data sources (e.g., claims, encounter, lab, immunization registries) to evaluate if services were performed.