

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

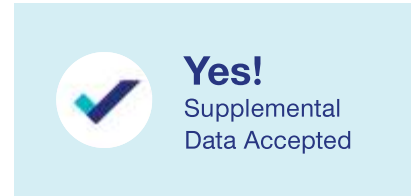
New for 2023

Added

- Rates now include stratification by race and ethnicity

Updated

- Members who died during the measurement year is now a required exclusion



Definition

Percentage of members who turned 15–30 months old during the measurement year and had the recommended number of well-child visits with a primary care provider.

- Children 0-15 months old during the measurement year: 6 or more well-child visits in the first 15 months of life.
- Children 15-30 months old during the measurement year: 2 or more well-child visits between 15–30 months of age.

| Plan(s) Affected | Quality Program(s) Affected | Collection and Reporting Method |
|--|--|--|
| <ul style="list-style-type: none"> • Commercial • Exchange/Marketplace • Medicaid | <ul style="list-style-type: none"> • CMS Quality Rating System • Select Medicaid State Reporting | Administrative <ul style="list-style-type: none"> • Claim/Encounter Data |

Codes

The following codes can be used to close HEDIS® numerator gaps in care; they are not intended to be a directive of your billing practice.

| Well-Care Visits | |
|-------------------------|---|
| CPT®/CPT II | 99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395, 99461 |
| HCPCS | G0438, G0439, S0302, S0610, S061, S0613 |
| ICD-10 Diagnosis | 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 |
| SNOMED | 103740001, 170099002, 170107008, 170114005, 170123008, 170132005, 170141000, 170150003, 170159002, 170168000, 170250008, 170254004, 170263002, 170272005, 170281004, 170290006, 170300004, 170309003, 171387006, 171394009, 171395005, 171409007, 171410002, 171416008, 171417004, 243788004, 268563000, 270356004, 401140000, 410620009, 410621008, 410622001, 410623006, 410624000, 410625004, 410626003, 410627007, 410628002, 410629005, 410630000, 410631001, 410632008, 410633003, 410634009, 410635005, 410636006, 410637002, 410638007, 410639004, 410640002, 410641003, 410642005, 410643000, 410644006, 410645007, 410646008, 410647004, 410648009, 410649001, 410650001, 442162000, 783260003, 444971000124105, 446301000124108, 446381000124104, 669251000168104, 669261000168102, 669271000168108, 669281000168106 |

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA). CPT® is a registered trademark of the American Medical Association. UnitedHealthcare will make the final determination regarding reimbursement upon receipt of a claim. Submitting a claim with a code included in this document is not a guarantee of payment. Payment of covered services is contingent upon coverage within an individual member's benefit plan, your eligibility for payment, any claim processing requirements, and your participation agreement with UnitedHealthcare.

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Required Exclusion(s)

| Exclusion | Timeframe |
|--|--|
| <ul style="list-style-type: none"> Members in hospice or using hospice services Members who died | - Any time during the measurement year |

Tips and Best Practices to Help Close This Care Opportunity:

- **Please check your Patient Care Opportunity Report (PCOR) often to see members with open care opportunities.** If you have questions, your UnitedHealthcare representative can help.
- If provider is seeing a patient for Evaluation and Management (E/M) services and all well-child visit components are completed: Attach modifier 25 or 59 to the well-child procedure code so it's reviewed as a significant, separately identifiable procedure.
 - Modifier 25 is used to indicate a significant and separately identifiable evaluation and management (E/M) service by the same physician on the same day another procedure or service was performed.
 - Modifier 59 is used to indicate that 2 or more procedures were performed at the same visit, but to different sites on the body.
- Helpful resources about the components of care are available at brightfutures.aap.org.
- Well-care visits can be accepted as supplemental data, reducing the need for some chart review. Please contact your UnitedHealthcare representative to discuss clinical data exchange opportunities.
- Sharing member demographic data is critical to understanding the cultural, linguistic and social needs of those we serve and decreasing health inequities across the care continuum. This data can include, but is not limited to, race, ethnicity, language, sexual orientation, gender identity, pronouns, sex assigned at birth and disability status. As part of UnitedHealthcare's clinical structured data exchange program, we encourage you to include this demographic data with any structured data file or CCD. Your information is confidential. UnitedHealthcare will keep personally identifiable information confidential and won't disclose any information without your written consent. Information is confidential. UnitedHealthcare will keep personally identifiable information confidential and won't disclose any information without your written consent.