

HEDIS MEASURE OVERVIEW

Child and Adolescent Well-Care Visits (WCV)

Please note that the information offered in this flyer is based on Healthcare Effectiveness Data and Information Set (HEDIS®) technical specifications. It is not meant to replace your clinical judgment.

Child and Adolescent Well-Care Visits (WCV) is one of the National Committee for Quality Assurance (NCQA) HEDIS measures used to evaluate the care and services provided to patients. The measure is designed to ensure adequate care for children and adolescents, including screening and counseling for social, emotional and physical conditions during this critical time.¹

Who is included in the WCV measure?

Patients 3–21 years of age by Dec. 31 of the measurement year

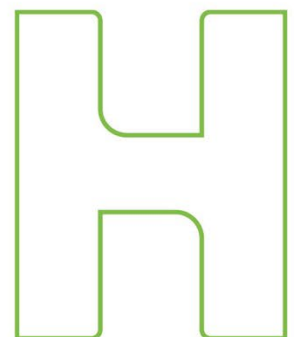
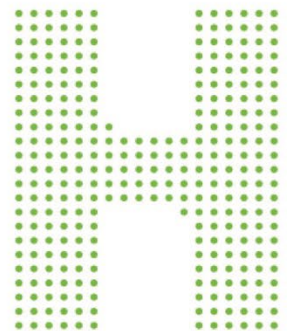
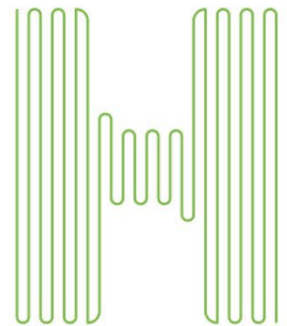
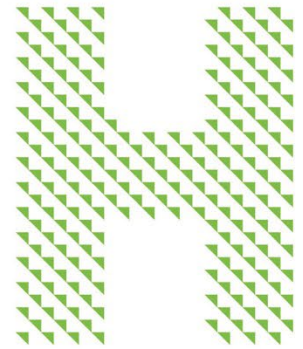
Service(s) needed for measure compliance

A comprehensive well-care visit with a primary care provider (PCP) or obstetrician-gynecologist (OB-GYN)

Well-care visits may be conducted during a sick visit, as long as the documentation not only addresses the intent of the visit but also the preventive services with all the required components documented.

The following components must be included and documented in a well-child visit:

- Physical exam, including body mass index (BMI)
- Health and development history – physical and mental
- Health education and anticipatory guidance – including nutrition and physical activity
- Appropriate immunizations according to age and health history
- Dental, vision and hearing screening when required and include referral and follow-up, as appropriate
- Perform age-appropriate depression, alcohol and substance use screening annually
 - Document the instrument and screening result accordingly in patient’s medical record
- Referral and follow-up as appropriate



¹ Child and Adolescent Well-Care Visits (W30, WCV), National Center for Quality Assurance www.ncqa.org/hedis/measures/child-and-adolescent-well-care-visits/

Exclusions

- Patients using hospice services
- Patients who died anytime during the measurement year

Measure best practices

- Ensure clearinghouses and/or third-party billing contractors include all codes, regardless of reimbursement.
- Educate the parent/guardian or patient on the importance of well-care visits.
- Offer block scheduling for families with multiple children who need a well-care visit.
- Ensure accurate patient contact information is on file.
- Use a standardized template during the visit to capture all required elements.

WCV coding

| Code type | Codes | Description |
|--|---|--|
| International Classification of Diseases, Tenth Revision (ICD-10) | 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 | Factors influencing health status and contact with health services |
| Current Procedural Terminology (CPT®) | 99381–99385, 99392–99395 | New and established patient preventive medicine services |
| Healthcare Common Procedure Coding System (HCPCS) | G0438, G0439, S0302, S0610, S0612, S0613 | Annual Wellness Visits; Early and Periodic Screening, Diagnostic and Treatment (EPSDT) screening to be billed with evaluation and management (E/M) CPT code; annual gynecological exam |

Information regarding inclusion, compliance and exclusions for this measure were sourced from the HEDIS Measurement Year 2024: Volume 2: Technical Specifications for Health Plans report. The coding information in this document is subject to changing requirements and should not be relied on as official coding or legal advice. All coding should be considered on a case-by-case basis and supported by medical necessity and appropriate documentation in the medical record.

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