



Child and Adolescent Well-Care Visits (WCV)

HEDIS measure overview

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

What is the WCV measure?

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.

Who is included in the WCV measure?

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

How does a patient become compliant?

A patient becomes compliant when they have a comprehensive well-care visit with a primary care physician (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
- Handouts given
 - 12 years old and up – Depression Screening and Follow-up for Adolescents and Adults (DSF-e)
 - **If DSF-e is positive, required second encounter within 30 days**
 - An outpatient, telephone, e-visit or virtual check-in follow-up visit with a diagnosis of depression or other behavioral health condition
 - A depression case management encounter that documents assessment for symptoms of depression or a diagnosis of depression or other behavioral health condition
 - BH encounter with assessment, therapy, collaborative care or medication management
 - Dispensed anti-depressant medication
 - or**
 - Documentation of additional depression screening on a full-length instrument indicating either no depression or no symptoms that require follow-up (i.e., negative screen) on the same day as a positive screen on a brief screening instrument

Exclusions

- Patients using hospice services
- Patients who died 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

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