



Child and Adolescent Well-Care Visits

What is the Child and Adolescent Well-Care Visit measure?

The North Carolina Department of Health and Human Services (DHHS) has selected the HEDIS Child and Adolescent Well-Care Visits (WCV) measure as one of the measures that care management entities will be responsible for and reporting on. This is a process measure used to determine the percentage of members 3-21 years of age who have had at least one comprehensive well-care visit during the measurement year.

The denominator for this measure is your eligible population of ages 3-21 as of December 31 of the measurement year. This measure does not allow for denominator exclusions, but has a measure exclusion for children in hospice care.

The measure allows for no more than one gap in enrollment for up to 45 continuous days during the continuous enrollment period.

The numerator reflects the number of children who have had one or more well-care visits during the measurement year. The measure is stratified into the following age brackets:

- 3-11 years
- 12-17 years
- 18-21 years
- Total – the total is the sum of the age stratification

Why is this measure important?

Most importantly, the WCV measure helps to ensure that children under the age of 21 are receiving the proper care they need to stay healthy. These visits give the provider, parents, guardians and child the opportunity to talk about the child's development, nutrition, safety, immunizations and other age-appropriate topics. Another important role of well-care visits is to ensure the child is immunized to be able to attend school and daycare, and to participate in sports.

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How can Tailored Care Management organizations ensure the well-care visit measure is being met?

Care Management Agencies (CMAs) and Advanced Medical Homes+ providers (AMH+s) can encourage or require staff who provide care management services to children to take the early and periodic screening, diagnostic, and treatment (EPSDT) training that will be available in Alliance's training platform.

It is important for care management staff to understand the well-care visit schedule so that staff can ask questions during the child's care management comprehensive assessment to determine if the child is current or up to date with well-care visits. If the child is not, it will be important to understand the reasons that the child's well visits are not current and to focus on any barriers to getting the child's visits up to date. This may require education of the parent/guardian.

Also, care management organizations can set up their care management platforms to trigger gaps in care at 90 days before an event is due. In this case, the care manager will need to monitor for those gaps in care to determine which members are due for a well-care visit. This advance notice will allow time for the care manager to work with the parent/guardian to set up the appointment and arrange transportation and childcare for other children, if needed. It will also allow time for the care manager to monitor and manage other barriers to attending the appointment that may arise.

If a care manager is attending other physical health visits with the child, they can alert the primary care provider (PCP) of any lapses in well-care visits.

References:

Please visit <https://www.aap.org/en/practice-management/bright-futures> for more information about well-child visits.