

HEDIS Documentation Tips for Providers



Well Child Visits in First 15 Months (W15)

- ▶ Members **need a minimum of six well-visits prior to turning 15 months old** in order to be compliant. Encourage parents/guardians to stay on track with their child's appointments and to make their next appointment before leaving the office.
- ▶ **More detailed language** is needed to describe a member's physical and mental development. "Well developed" is no longer acceptable; however, "development appropriate for age/development within normal limits" is acceptable. Other examples include: rooting/grasp/sucking reflex, head to midline when on back, lifts head when on abdomen, looks at face, smiles/quiets to mother's voice, increased attention span, and babbles/coos/laughs out loud.
- ▶ **All five health components are required and must be appropriately documented.** This includes Health History, Mental Development, Physical Development, Physical Exam and Anticipatory Guidance.
- ▶ Handouts given during a visit without evidence of a discussion no longer meets compliance criteria. **A discussion with the member's guardian concerning a handout must be documented.**

Well Child Visits for Children 3-6 Years Old (W34) & Adolescent Well Child Visit (AWC)

- ▶ **More detailed language is needed** to describe a member's physical and mental development. "Well developed" is no longer acceptable; however, "development appropriate for age/development within normal limits" is acceptable. W34 examples include: hops, toilet trained, brushes own teeth, dresses self, follows simple directions, prints some letters, counts to ten, and names colors. AWC examples include: Tanner Staging, school performance, peer and family interaction, active in sports, and menarche/puberty.
- ▶ **All five health components are required and must be appropriately documented.** This includes Health History, Mental Development, Physical Development, Physical Exam and Anticipatory Guidance.
- ▶ Handouts given during a visit without evidence of a discussion does not meet compliance criteria. **A discussion with the member's guardian concerning a handout must be documented.**

Weight Assessment and Counseling for Children (WCC)

- ▶ A **BMI percentile must be documented** along with height and weight. BMI documentation alone is not compliant.
- ▶ **Appropriate documentation is required for physical activity and nutritional counseling.** Examples include: anticipatory guidance for nutrition/physical activity, discussion of diet/eating habits, participation in sports, discussion of exercise routine, and weight/obesity counseling. Documentation of appetite (good/normal/poor) is not acceptable.

Comprehensive Diabetes Care (BP control <140/90) (CDC) & Controlling Blood Pressure (CBP)

- ▶ Anxiety may cause a member's blood pressure to be elevated at the beginning of an appointment. If their blood pressure is outside of the acceptable range (>140/90), **retake their blood pressure at the end of the appointment** to verify they are still outside the acceptable range.

Questions?

Contact your Provider Relations representative or call 1-877-647-4848. Thank you for being our partner in care.