



# Well-Child Measure Highlight

# Agenda

- 1) Background, Focus & Objectives
- 2) Measure Descriptions
- 3) Best & Promising Practices
- 4) Pay-for-Performance (P4P)
- 5) Resources
- 6) Sharing Best Practices: LifeLong



# Background

- CA Governor Newsom's focus: preventive health for children
- DHCS increased accountable measures related to children
- DHCS's Goals:
  - Close racial/ethnic disparities in well-child visits and immunizations by 50%.
  - Ensure all health plans exceed the 50<sup>th</sup> percentile for all children's preventive care measures.



**Mission**

***Improving the health and well-being of our members by collaborating with our provider and community partners to deliver high quality and accessible services.***

**Vision**

***All residents of Alameda County will achieve optimal health and well-being at every stage of life.***

# Today's Focus

## Primary Measures

- Well-Child Visits in the First 0-15 Months of life (W30-6+)
- Well-Child Visits in the First 15-30 Months of life (W30-2+)

## Correlating Measures

- Childhood Immunization Status-Combination 10 (CIS-10)
- Developmental Screening in the First Three Years of Life (DEV)
- Lead Screening in Children (LSC)
- Topical Fluoride for Children (TFL-CH)

# Objectives

At the end of this webinar, you will be able to:

- Have a better understanding of the well-child measure definitions.
- Walk away with tactics to promote preventative measures.
- Identify best and promising practices that can be used to in your practices.

# Measure Descriptions

Measure definitions per NCQA (HEDIS) and CMS

# Well-Child Visits in the First 0-30 Months of Life

## First 0-15 Months of Life (W30-6+)

HEDIS: % of children, by 15 months, during 2023 who had at least 6 well-visits with a primary care physician.

## First 15-30 Months of Life (W30-2+)

HEDIS: % of children, 15-30 months, during 2023 who had at least 2 well-visits with a primary care physician.



# ...continued W30

## Notes:

- Follows periodicity outlined in [Bright Futures Clinical Guidelines](#).
  - 14-Day Rule: HEDIS specifications require that visits must be at least 14-days apart.
- Telehealth: Visits count towards this measure.
  - For billing guidance: 2023 P4P Program Quick Reference Guide for Billing.
- All well-visits are reimbursed between 0-30 months of life.

# Childhood Immunization Status- Combination 10 (CIS-10)

HEDIS: % of children whose 2<sup>nd</sup> birthday falls within 2023 who had:

Dose #	Immunization
4	diphtheria, tetanus and acellular pertussis (Dtap)
3	polio (IPV)
1	measles, mumps and rubella (MMR)
3	haemophilus influenza type B (HiB)
3	hepatitis B (HepB)
1	chicken pox (VZV)
4	pneumococcal conjugate (PCV)
1	hepatitis A (HepA)
2-dose series or 3-dose series	rotavirus (RV)
2	influenza (flu) vaccines

# ...continued CIS-10

## Tips:

- Follows immunization periodicity outlined in [CDC Immunization Schedules](#) and [Bright Futures Clinical Guidelines](#).

## Medical Record Notations:

Immunization	Note
Flu	1 of the 2 can be a Live-Attenuated Influenza Vaccination (LAIV)
HepB	<ul style="list-style-type: none"> <li>• While documenting, indicate if the child received the <b>“immunization at delivery,” “in the hospital,”</b> or <b>“at birth.”</b></li> <li>• Include the date of service.</li> </ul>
Combination Vaccines	For those that require more than one antigen (e.g., Dtap and MMR). Document evidence that all components were given of all antigens.
All Immunizations	If antigen was received, document specific antigen and date of immunization in the California Immunization Registry (CAIR2)

# Developmental Screening in the First Three Years of Life (DEV)

CMS: % of children screened for risk of developmental, behavioral, and social delays using a standardized screening tool in the 12 months prior or on their 1<sup>st</sup>, 2<sup>nd</sup>, or 3<sup>rd</sup> birthday.

## Notes:

- Use claim code 96110

# Lead Screening in Children (LSC)

HEDIS: % of children, by 24 months, who had  $\geq 1$  blood tests (capillary or venous) for lead poisoning in 2023.

## Medical Record Notations:

Include:

- Date(s) of the test
- Result(s)



# Topical Fluoride for Children (TFL-CH)

CMS: % of children, 1-20 yo, who received at least 2 topical Fluoride Varnish (FV) applications in 2023.

## Tooth Decay

- Most common chronic disease and greatest unmet health need.
- An infectious disease that can be transmitted from mothers.

## Alameda County STATS

- 50% of Medi-Cal children, 6-20 yo, had a dental visits
- 50% of Medi-Cal pregnant women utilize dental services.
- Asian & Black/African Americans, 0-5 yo, in selected WIC programs have a higher prevalence of untreated tooth decay
- Latinas & Black/African-Americans, and those with lower educational attainment, are less likely to use dental services during pregnancy

**Resource:** Office of Dental Health, Alameda County Public Health Department. (2019). *Alameda County Oral Health Strategic Plan 2019-24*. Office of Dental Health, Alameda County Public Health Department..

[http://www.acgov.org/board/bos\\_calendar/documents/DocsAgendaReg\\_1\\_28\\_19/HEALTH%20CARE%20SERVICES/Regular%20Calendar/Item\\_1\\_2\\_Oral\\_Health\\_Strategic\\_Plan\\_DRAFT.pdf](http://www.acgov.org/board/bos_calendar/documents/DocsAgendaReg_1_28_19/HEALTH%20CARE%20SERVICES/Regular%20Calendar/Item_1_2_Oral_Health_Strategic_Plan_DRAFT.pdf)



# ...continued TFL-CH

## Billing Tip:

- Measure captured by claims; CPT 99188
  - Reimbursement: 125% of Medi-Cal Rate

## FV Implementation

- Promote oral health & FV application during Prenatal visits.
- Combine FV applications with well-child visits.
- Oral Health Patient Education.
- [Pediatric Dental Referral Network accepting Denti-Cal.](#)
- Alliance to host virtual training with Alameda County Office of Dental Health.
- Alameda County Office Dental Health provides training:
  - **Phone:** (510) 208-5910
  - **Email:** [dentalhealth@acgov.org](mailto:dentalhealth@acgov.org)

# Best & Promising Practices

Tips and tricks to improve processes and measure rates



# Claims

Tips for billing claims

# Submitting Claims

- If a patient is coming in for a sick visit, and due for a well-visit, conduct the well-visit at the same time.
- Use coding to document exclusions.
- Submit claims and encounter data timely.

# Tips & Tricks

From Alliance Network Providers



# Electronic Medical/Health Record Systems

- Utilize health/flag alerts.
- Conduct chart scrubbing prior to visits.
- Utilize standardized templates.



# Increasing Access

- Reduce waiting times:
  - Immunization clinics.
  - After hours and/or weekend clinics.
  - Organize/join health fairs.
- Offer back-to-back sibling well-visits.
- Strengthen partnership with schools.
- Use dedicated exam rooms.



# Equity Approaches

Consider using an equity approach to increase access for targeted communities:

- Review well-care visit measure completion rate factors
- Screen for health-related social needs.
- Design member information to be equitable.
- Involve patients and their family members in decision-making.
- Leverage shared decision-making, teach-back and motivational interviewing tools.
- Partner with local community resources.
- Utilize Community Health Workers (CHW).



# Communication & Education

- Schedule next appointments as soon as possible.
- Utilize clinicians and staff to educate parents.
- Huddle with staff often to discuss requirements.
- Outreach to, and remind, parents.

# Pay-for-Performance (P4P) Program

Measurement Year (MY) 2023



# Measures in P4P

## Background

- Tied into DCHS Managed Care Accountability Set (MCAS) Metrics
- Supports the Alliance's Mission & Vision
- Promotes Quality Care and Preventive Care

Child & Adolescent Measures in the P4P	
Child and Adolescent Well-Care Visits (WCV)	Well-Child Visits in the First 15 Months of Life (W30-2+)
Childhood Immunizations Status – Combination 10 (CIS-10)	Well-Child Visits in the First 15-30 Months of Life (W30-6+)
Immunizations for Adolescents: Combination 2 (IMA-2)	Lead Screening in Children (LSC)

# Resources

Resources from the Alliance

# Health Education

## Patient Health & Wellness Education

- ▶ **Live Healthy Library:**  
online materials and links
- ▶ **Provider Resource Guide:**  
health programs and  
community resources
- ▶ **Wellness Program &  
Materials Request Form:**  
request mailed materials





# Care Coordination

## Help Me Grow First 5, Alameda County

- Ages: Birth – 5 years
- Measures: W30, WCV (2-5 years of age)
- Services:
  - Outreach to families
  - Promote importance of well-visits
  - Support scheduling appointments

Contact: [DeptQITeam@alamedaalliance.org](mailto:DeptQITeam@alamedaalliance.org)

# Reports

## Gap in Care Lists

- HEDIS
- Initial Health Appointment (IHA)
- Emergency Department Utilization

# Project Support

## Quality Improvement Team

- Project Management
  - Contact: [DeptQITeam@alamedaalliance.org](mailto:DeptQITeam@alamedaalliance.org)

# Upcoming Webinars

## Measure Highlights

All sessions are from Noon – 1 p.m.

- March 15, 2023: FUA/FUM
- May 17, 2023: W30
- May 24, 2023: FUA/FUM

**RSVP:** [bit.ly/3Y3Dckz](https://bit.ly/3Y3Dckz)

**Contact:** [DeptQITeam@alamedaalliance.org](mailto:DeptQITeam@alamedaalliance.org)

# Access Standards

PRIMARY CARE PHYSICIAN (PCP) APPOINTMENT	
Appointment Type:	Appointment Within:
Non-Urgent Appointment	10 Business Days of Request
OB/GYN Appointment	10 Business Days of Request
Urgent Appointment that <i>requires</i> PA	96 Hours of Request
Urgent Appointment that <i>does not</i> require PA	48 Hours of Request
SPECIALTY/OTHER APPOINTMENT	
Appointment Type:	Appointment Within:
Non-Urgent Appointment with a <b>Specialist</b> Physician	15 Business Days of Request
Non-Urgent Appointment with a <b>Behavioral Health</b> Provider	10 Business Days of Request
Non-Urgent Appointment with an <b>Ancillary Service</b> Provider	15 Business Days of Request
OB/GYN Appointment	15 Business Days of Request
Urgent Appointment that <i>requires</i> PA	96 Hours of Request
Urgent Appointment that <i>does not</i> require PA	48 Hours of Request
ALL PROVIDERS WAIT TIME/TELEPHONE/LANGUAGE PRACTICES	
Appointment Type:	Appointment Within:
In-Office Wait Time	60 Minutes
Call Return Time	1 Business Day
Time to Answer Call	10 Minutes
Telephone Access – Provide coverage 24 hours a day, 7 days a week.	
Telephone Triage and Screening – Wait time not to exceed 30 minutes.	
Emergency Instructions – Ensure proper emergency instructions.	
Language Services – Provide interpreter services 24 hours a day, 7 days a week.	

\* Per DMHC and DHCS Regulations, and NCQA HP Standards and Guidelines PA = Prior Authorization

# Sharing Best Practices

LifeLong William Jenkins Health Center

Omoniyi Omotoso, MD, MPH, FAAP

Associate Director of Pediatrics



# Thanks!

## Questions?

**You can contact us at:**

 [DeptQITeam@alamedaalliance.org](mailto:DeptQITeam@alamedaalliance.org)