

Adolescent Well Care (AWC)

Performance Measure Set: CCO Incentive Metric Medicare Star Measure Quality

Measurement Type: Structure Process Outcome Patient Experience

Data Type: Claims Chart Documentation eCQM Survey Other

State Benchmark: 65.2% (2018 National Medicaid 75th percentile)

Who: Adolescents between the age of 12–21 as of December 31 of the measurement year, who complete an annual well-care exam during the calendar year.

Why: “Bright Futures” recommends annual well-care visits for adolescents ages 11–21 years, as they are a strong vehicle to deliver screening, anticipatory guidance, and health education to support healthy development now and in the future (source: OHA Guidance Document).

What: An annual well-care exam completed during the 2019 calendar year that includes at least a physical exam, health and developmental history, health education, and anticipatory guidance.

How: Some ideas to improve Adolescent Well Care visits include:

- Flip sick visits into well-care visits (modifier 25).
- Encourage adolescents to get a well-care exam instead of a sports physical.
- SWAG events.

Exclusions: None.

Coding: The following codes do not need to be used in combination; one CPT or diagnosis code will be sufficient, and codes do not need to be primary to count toward the metric.

CPT: 99383-99385, 99393-99395

ICD-10: Z00.00, Z00.01, Z00.121, Z00.129, Z00.5, Z00.8, Z02.0, Z02.1, Z02.2, Z02.3, Z02.4, Z02.5, Z02.6, Z02.71, Z02.82, Z76.1, Z76.2

Note: The ICD-10 codes below (Z02.xx ICD-10 codes) are not covered under OHP administrative rules or on the prioritized list as of October 1, 2018; however, this measure does include denied claims.

Adolescent Well Care (AWC) FAQs

Q: What documentation do I need to have in the chart to support an Adolescent Well Care visit?

A: There are three areas that need to be addressed to have appropriate documentation for an Adolescent Well Care visit:

1. Health & Development History (Physical & Mental)
2. Physical Exam
3. Health Education or Anticipatory Guidance

Q: If the member comes in for a different type of visit (e.g. sick visit), can I also complete a well care visit and get credit for it?

A: Yes! When providing two separate services, **modifier 25** can be used to bill for both if there is documentation to support it (see Adolescent Well Care documentation above). **Modifier 25** is used to denote *“Significant, separately identifiable evaluation and management (E/M) service by the same physician on the day of a procedure.”*

Q: How do I know which members are due for an Adolescent Well Care visit?

A: Each CareOregon member should have an Adolescent Well Care at least once per calendar year. If you haven't seen a member this year, we suggest outreaching to schedule an appointment. Additionally, you can find a list of members assigned to your clinic who are due for an Adolescent Well Care visit per CareOregon claims data on the CareOregon Business Intelligence (COBI) portal. If you do not have COBI access, please email your Provider Services Representative.

Q: How many well visits can an adolescent have?

A: CareOregon will cover as many Adolescent Well Care visits as appropriate per provider discretion within a 12-month period. We believe well visits are important and do not want to create barriers to members receiving them.

Q: What if the member only has secondary CCO coverage, and their primary insurer is commercial, Medicare, or some other payer?

A: Members with secondary CCO coverage are included in the measure per the OHA specifications. The CCO is required to assign a PCP to all members (even those with secondary coverage). This means sometimes members might be assigned to you by the CCO even if their primary insurance assigns them somewhere else. This can seem unfair to clinics, but it is how the CCO is measured by the OHA. The good news is, this is a small group of members compared to the whole measure denominator!

Q: What is the difference between a Well Child Check and an Adolescent Well Care visit?

A: Some providers, clinics and parents may still refer to the visits as Well Child Checks. It is technically an adolescent well-care visit when the patient is between the ages of 12 and 21. The difference is the type of exam and discussion in the visit. Young children might need more immunizations or developmental screenings, but adolescents begin to receive counseling about drug/violence avoidance, sexual health, and taking responsibility for their own health from providers.

Q: Does an Adolescent Well Care visit done at a School Based Health Center count toward the metric?

A: Yes! Visits to school-based health centers (SBHC) in a CCO's provider network are included in the measure if the billing/coding is submitted as a claim through the CCO.

Q: Does the patient need to be seen by their PCP for it to count for the metric?

A: No. The provider does not have to be the assigned PCP.