

Weight Assessment and Counseling for Children and Adolescents

Performance Measure Set: CCO Incentive Medicare Star Rating
Quality Measurement Type: Structure Process Outcome Patient Experience
Data Type: Claims Chart Documentation eCQM Survey Other Medicaid
State Benchmark: 32.7% (MIPS 2018 benchmark – 70th Percentile)

Who: All patients age 3 - 17 years who have had at least one PCP or OB/GYN visit in 2019.

Why: The prevalence of obesity among children has been rapidly increasing over the past two decades, and the number of overweight children at risk of becoming obese is also of great concern. The Centers for Disease Control and Prevention (CDC) states that overweight children and adolescents are more likely to become obese as adults. Therefore, children’s weight status is an important thing to monitor and children need guidance on maintaining healthy eating and exercising habits. Oregon’s Health Plan Quality Metrics Committee has visions for this measure as the first step towards an outcome-based approach to reducing childhood obesity.

What: Using EHR-based data, this measure reflects the average of three percentages:

- Patients who had their height, weight, and BMI percentile recorded during the year
- Patients who had counseling for nutrition during the year
- Patients who had counseling for physical activity during the year

How: An annual wellness visit performed by a PCP or OB/GYN where a patient’s height, weight and BMI percentile is recorded and counseling for nutrition and physical activity is provided during the measurement period.

Some steps to improve your Weight Assessment and Counseling rates are:

- Ensure all patients age 3 to 17 are scheduled for an annual wellness visits
- Identify and implement workflows to ensure BMI is recorded for all children and that any necessary counseling is documented properly

Exclusions: Patients who are pregnant or in hospice are excluded.

Data reporting: This measure aligns with **NQF 0024/CMS 155v7**. CareOregon must receive data pulled from each clinic's EHR reporting for this measure; the data is then aggregated across all clinics in the CCO region and submitted to OHA. Please note the following reporting requirements:

- Patient-level detail, for CareOregon members only, is preferred
- Reporting must be for the full calendar year of 2019; mid-year reports preferred in a rolling 12-month timeframe
- Data can be formatted in QRDA category 1 or Excel

Please email your Quality Improvement Analyst or Provider Relations Specialist with any questions about data reporting.

Weight Assessment and Counseling FAQ

Q: How is performance calculated when there are three rates?

A: The three rates are reported using the same denominator with each numerator calculated independently. Performance will be calculated as a simple average of the three rates.

Q: How do I pull the necessary EHR-based reports?

A: This measure follows the eCQM specifications used by CMS. To find out how to pull this report from your EHR you can use this resource: <https://ecqi.healthit.gov/> or reach out to your Provider Relations Specialists/Primary Care Innovation Specialist.

Q: How do I submit EHR-based reports to the CCO?

A: Reports are generally submitted to the CCO by SFTP or secure email. Reach out to your Provider Relations Specialist or Primary Care Innovation Specialist for more information

Q: What if I can't report with the necessary specifications?

A: Unfortunately, we cannot accept data that doesn't align with the approved specifications outlined in the OHA measure technical specifications. Reach out to your Primary Care Innovation Specialist for more information or review the technical specifications on OHAs website: <https://www.oregon.gov/oha/HPA/ANALYTICS/Pages/CCO-Metrics.aspx>

Q: Does my clinic need to report all three rates?

A: Yes, each of the three rates is reported. The intent of this measure is to provide counseling to all patients; therefore, nutrition and physical activity counseling are reported even for patients with a BMI within optimal ranges. The three rates are reported using the same denominator with each numerator calculated independently. Performance will be calculated as a simple average of the three rates.