

Well-Child Visits in the First 30 Months of Life (W30)

By collaborating, we can improve health outcomes for your patients, our members. This MDwise tip sheet provides best practices and tips that can optimize HEDIS scores and identify opportunities to improve patient care.

What Is the Measure?

This measure assesses the percentage of members who had the following number of well-child visits with a Primary Care Physician (PCP) during the last 15 months. The following rates are reported:

1. **Well-Child Visits in the First 15 Months:** Children who turned 15 months of age during the measurement year who had six (6) or more well-child visits.
2. **Well-Child Visits for Age 15 Months–30 Months:** Children who turned 30 months of age during the measurement year who had two (2) or more well-child visits.

It is recommended that well-child visits follow the American Academy of Pediatrics Bright Futures Periodicity Schedule: [Periodicity Schedule](#)

Newborn	First Week (3 to 5 days)	1 month	2 months	4 months	6 months
9 months	12 months	15 months	18 months	24 months	30 months

IHCP-Covered Codes to Identify W30:

Description	Codes
Well-Child Visits	CPT: 99381-99385, 99391-99395, 99461 HCPCS: S0613 ICD10CM: Z00.00, Z00.01, Z00.110, Z00.111, Z00.121*, Z00.129*, Z00.2, Z00.3, Z01.411, Z01.419, Z02.5, Z76.1, Z76.2

*Required as a primary diagnosis for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) billing

Earn incentive dollars when your members meet this measure!

For example, a panel of 500 members = \$375/month
[Physician Pay for Value \(mdwise.org\)](#)

The American Academy of Pediatrics (AAP) Bright Futures initiative recommends that the well-child visits include, but are not limited to:

- An initial/interval medical history
- Physical exam
- Developmental assessment
- Immunizations
- Anticipatory guidance

How to Improve Your Quality Score:

- **Make every office visit count.** If time allows for additional quality procedures, avoid missed opportunities by taking advantage of every office visit, including sick visits and daycare physicals, to provide a well-child visit, immunizations, lead testing, developmental screening, BMI calculations (24+ months) and counseling.
- **Educate staff** to schedule the recommended AAP visits within the guideline time frames.
- **Allow 1-2 weeks of scheduling room to make up visits** before the child turns 15 or 30 months old. The well-child visits are to be completed on different dates of service on or before the 15-month and 30-month birthdays.
- **Inform caregivers** about the importance of frequent well-child visits during the first 30 months.
- **Actively pursue missed appointments** with reminder letters, calls and text messages.
- **Make outreach calls** to members who are not on track to complete the recommended number of well-child visits by 30 months of age.
- **Ensure the medical record includes** the date when a health and developmental history and physical exam were performed, and health education/anticipatory guidance was given.

