MEASURE W30-CH: WELL-CHILD VISITS IN THE FIRST 30 MONTHS OF LIFE

National Committee for Quality Assurance

A. DESCRIPTION

Percentage of children who had the following number of well-child visits with a primary care practitioner (PCP) during the last 15 months. The following rates are reported:

- Well-Child Visits in the First 15 Months. Children who turned age 15 months during the measurement year: Six or more well-child visits.
- Well-Child Visits for Age 15 Months–30 Months. Children who turned age 30 months during the measurement year: Two or more well-child visits.

Data Collection Method: Administrative

Guidance for Reporting:

- This measure modifies the former Well-Child Visits in the First 15 Months (W15-CH) measure. This measure is calculated using administrative data only.
- Report all services the state paid for or expects to pay for (i.e., claims incurred but not paid). Do not include services and days denied for any reason. If a child is enrolled retroactively, count all services for which the state paid or expects to pay.
- This measure adheres to the HEDIS 14-Day Rule. The 14-Day Rule specifies that well-child visits must occur 14 days apart to avoid double counting events when calculating the numerator. More information on the 14-Day Rule can be found in the HEDIS Volume 2 General Guidelines.
- Beneficiaries in hospice are excluded from the eligible population. For additional information, refer to the hospice exclusion guidance in Section II. Data Collection and Reporting of the Child Core Set.
- Refer to Appendix C for the definition of a PCP.

The following coding systems are used in this measure: CPT, HCPCS, ICD-10-CM, SNOMED, and UB. Refer to the Acknowledgments section at the beginning of the manual for copyright information.

B. ELIGIBLE POPULATION

Eligible Population: Rate 1 – Well-Child Visits in the First 15 Months
### Ages
- Children who turn age 15 months during the measurement year. Calculate the 15-month birthday as the child’s first birthday plus 90 days.

### Continuous enrollment
- 31 days – age 15 months. Calculate 31 days of age by adding 31 days to the date of birth.

### Allowable gap
- No more than one gap in enrollment of up to 45 days during the continuous enrollment period. To determine continuous enrollment for a beneficiary for whom enrollment is verified monthly, the beneficiary may not have more than a 1-month gap in coverage (i.e., a beneficiary whose coverage lapses for 2 months [60 days] is not considered continuously enrolled).

### Anchor date
- The date when the child turns age 15 months.

| Benefit | Medical. |
| Event/diagnosis | None. |

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### Eligible Population: Rate 2 – Well-Child Visits for Age 15 Months–30 Months

| Ages | Children who turn age 30 months during the measurement year. Calculate the 30-month birthday as the second birthday plus 180 days. |
| Continuous enrollment | 15 months plus 1 day–30 months of age. Calculate the 15-month birthday plus 1 day as the first birthday plus 91 days. |
| Allowable gap | No more than one gap in enrollment of up to 45 days during the continuous enrollment period. To determine continuous enrollment for a beneficiary for whom enrollment is verified monthly, the beneficiary may not have more than a 1-month gap in coverage (i.e., a beneficiary whose coverage lapses for 2 months [60 days] is not considered continuously enrolled). |

| Anchor date | The date when the child turns age 30 months. |
C. ADMINISTRATIVE SPECIFICATION

Rate 1 – Well-Child Visits in the First 15 Months

Denominator
The Rate 1 eligible population.

Numerator
Six or more well-child visits (Well-Care Value Set) on different dates of service on or before the 15-month birthday.

The well-child visit must occur with a PCP, but the PCP does not have to be the practitioner assigned to the child.

Rate 2 – Well-Child Visits for Age 15 Months–30 Months

Denominator
The Rate 2 eligible population.

Numerator
Two or more well-child visits (Well-Care Value Set) on different dates of service between the child’s 15-month birthday plus 1 day and the 30-month birthday.

The well-child visit must occur with a PCP, but the PCP does not have to be the practitioner assigned to the child.

D. ADDITIONAL NOTES

This measure is based on the American Academy of Pediatrics Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents (published by the National Center for Education in Maternal and Child Health). Visit the Bright Futures website for more information about well-child visits (https://brightfutures.aap.org/materials-and-tools/guidelines-and-pocket-guide/).