



2024 Best Practices Child & Adolescent Well-Care Visits

Best and Promising Practices

Partnership Tools and Programs

- The **Preventative Care Report** is continuously available in the [eReports portal](#) and is updated daily. This dashboard shows each provider's member list for the Child and Adolescent Well-Care Visits measure denominator, along with a history of completed visits and other information for scheduling Well Child Visits. Use this dashboard to track, schedule and complete annual visits for all children in your practice.
- The Preventative Care Report now contains race/ethnicity and language fields. Use this dashboard to look at Child and Adolescent Well-Care Visits completion rates by race, ethnicity and language to learn more about inequities within your patient community.
- Partnership offers a \$25 gift card incentive for completion of the Well-Care Visit for children aged 3-6 years who are overdue for a Well-Care Visit, through the **Healthy Kids Growing Together Program**.
- Attend or view Partnership's [Improving Measure Outcomes training](#) on *Preventative Care for 3-17 Year Olds*.
- Partnership members can access transportation for non-emergency medical services for assistance in traveling to and from appointments. Members can access services by calling [Partnership Transportation Services](#) at (866) 828-2303 Monday – Friday 7 a.m. – 7 p.m. PST.

Member Care:

- Annual Well-Care Visits should be completed as an in-person visit. Only in-person Well-Care Visits will be counted towards the PCP QIP numerator.
- Every visit can be viewed as an opportunity to complete an exam, such as sick visits when appropriate.
- Offer back-to-back sibling well child visits for families with multiple children seen in the practice.



- Use dedicated rooms for acute visits and well-care visits. Practices with multiple offices may consider using one location for well-visits and a different location for acute visits.
- Offer extended evening or weekend hours to accommodate work and school schedules.
- Have families' complete "pre-visit" forms in advance of the appointment, via telephone or member portal.
- Ensure proper documentation of all components, in the medical record, for each visit where preventive services are addressed.
- Physical and mental developmental history must include progress towards age-appropriate milestones; "development appropriate for age" is not sufficient documentation.
- Age-appropriate anticipatory guidance handouts can be found on the [Bright Futures website](#).
- Reduce missed opportunities by utilizing scribes and nursing staff to schedule well child future appointments when patients are waiting in the exam room. At minimum, schedule next appointment (if possible) before the patient leaves the office. Have parent/caregiver or older teen/young adult address appointment reminder card in their own handwriting.
- Set up EHR alerts to flag patients so each staff member can identify members who are due for Well Child Visits, immunizations, and screenings at every member/patient encounter and communicate with parents/guardians to schedule an appointment.
- Confirm all appointments one day prior to the appointment, using text messages or phone calls. Actively pursue missed appointments within 48 hours with reminder call by staff member.
- Use standardized templates in EMRs/EHRs to guide providers and staff through the visit to ensure all components were met and documented.

Equity Approaches:

- Consider using an equity approach to increase screening rates for targeted communities. By looking at Well-Care Visit measure completion rates by such factors as race, ethnicity, location (i.e., zip code), and preferred language, it is possible to identify barriers that affect specific communities, and plan interventions to address these barriers.
- Ensure member information is consistent, welcoming, plain and person-centered, language appropriate, and delivered in traditional and electronic applications, per patient's preference.

- Have a conversation with the patient and caregivers to confirm that health information and next steps covered in the visit are mutually understood, patient and caregivers agree with any plans made, and the patient and caregivers were given the opportunity to ask questions.
- Identify and address barriers to care (transportation, hours of operation, child care). Partner with established community agencies, schools, after-school programs, faith-based organizations.

For Children Ages 3 – 6 Years:

- Incorporate fluoride varnish application into Well-Care Visits for children ages 6 month - 5 years. See **Unit of Service for Dental Fluoride Varnish Best Practices** document for more information on adding this service to Well-Care Visits.
- Scrub charts for completion of a blood lead test, and order a blood lead test for all children up to age 6 years if there is no documentation of previous test results. See **Lead Screening for Children Best Practices** document for more information on this required test for all children on Medi-Cal.

For Pre-teens and Teens:

- Establish a Teen Clinic within pediatric and family practices. Create policies and procedures around confidential services for adolescent well child visits.
- Educate pre-teens and their caregivers around changes to their Well-Care Visit from age 12 onward, including the confidential conversation portion of the visit, confidential services for adolescents, and adolescent screenings and vaccinations, including HPV series. Conversations can begin at age 11.
- Train provider teams around [screening tools](#) and communication skills for confidential conversations with teens. Confidential conversations should include a depression screen and follow-up, a tobacco screening, a substance use screening, and a conversation about sexual health.
- Create policies and procedures around Health Care Transitions for 18 year olds.

Data and Coding

- Ensure proper documentation of all components in the medical record for each visit where preventive services are addressed.
- Use coding to document exclusions.
- Submit claims and encounter data within 90 days of service. We highly encourage submitting claims within 14-to-30 days of service toward the end of the measurement year period to avoid claims lag.
- Use complete and accurate codes to capture services completed for telehealth and in-person visits.

Helpful Links:

2024 PCP QIP Technical Specifications

- Measure Description
- Exclusions
- PCP QIP Full Points, Partial Points, Relative Improvement Definitions
- Notes for eReports and PQD

QIP eReports Portal:

- 2024 Detailed PCP QIP Technical Specifications
- Measure Reports
- Diagnosis Code Crosswalk Report
- QIP Member Report