

Coding Reference Guide Measurement Year 2025

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



Measure Description

Children who had the following number of well-child visits with a PCP during the following timeframes:

- **Well-Child Visits in the First 15 Months**
Children who turned 15 months old during 2025 and had six or more well-child visits on different dates of service on or before the 15-month birthday
- **Well-Child Visits Between Age 15 Months and 30 Months**
Children who turned 30 months old during 2025 and had two or more well-child visits on different dates of service after the 15-month birthday plus one day through the 30-month birthday

Documentation in the medical record must include all the following:

- Health history
- Physical developmental history
- Behavioral developmental history
- Physical examination
- Health education/anticipatory guidance

Notes:

- Per HEDIS guidelines, well-child visits must occur 14 days apart
- The well-child visit must occur with a PCP, but does not have to be the PCP assigned to the child
- The well-child visit may be conducted during a sick visit if the documentation addresses the intent of the visit as well as all elements of a well-child visit including a comprehensive physical examination
- This measure is based on the American Academy of Pediatrics Bright Futures: *Guidelines for Health Supervision of Infants, Children, and Adolescents*
- Visit **Bright Futures: A National Health Promotion Initiative** for best practices related to preventive visits for infants, children, or adolescents

The following codes meet the criteria:	
Well-Care Visits (Do not include telehealth visits.)	CPT: 99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395, 99461
	HCPCS: G0438, G0439, S0302, S0610, S0612, S0613
	SNOMED: 103740001, 170099002, 170107008, 170114005, 170123008, 170132005, 170141000, 170150003, 170159002, 170168000, 170250008, 170254004, 170263002, 170272005, 170281004, 170290006, 170300004, 170309003, 171387006, 171394009, 171395005, 171409007, 171410002, 171416008, 171417004, 243788004, 268563000, 270356004, 401140000, 410620009, 410621008, 410622001, 410623006, 410624000, 410625004, 410626003, 410627007, 410628002, 410629005, 410630000, 410631001, 410632008, 410633003, 410634009, 410635005, 410636006, 410637002, 410638007, 410639004, 410640002, 410641003, 410642005, 410643000, 410644006, 410645007, 410646008, 410647004, 410648009, 410649001, 410650001, 442162000, 783260003, 1269517007, 1269518002, 444971000124105, 446301000124108, 446381000124104, 669251000168104, 669261000168102, 669271000168108, 669281000168106
Encounter for well-care (Do not include telehealth visits.)	ICD10: Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z00.3, Z01.411, Z01.419, Z02.5, Z02.84, Z76.1, Z76.2 Do not include laboratory claims with POS code 81.
The following will exclude Members from this measure:	
Hospice Encounter During 2025	HCPCS: G9473, G9474, G9475, G9476, G9477, G9478, G9479, Q5003, Q5004, Q5005, Q5006, Q5007, Q5008, Q5010, S9126, T2042, T2043, T2044, T2045, T2046
	SNOMED: 183919006, 183920000, 183921001, 305336008, 305911006, 385765002
	UBREV: 0115, 0125, 0135, 0145, 0155, 0235, 0650, 0651, 0652, 0655, 0656, 0657, 0658, 0659
Hospice Intervention During 2025	CPT: 99377, 99378

Hospice Intervention During 2025 (cont.)	HCPCS: G0182
	SNOMED: 170935008, 170936009, 385763009
Members who died any time during 2025	

Tips and Best Practices to Help Improve Performance

- Each encounter is an opportunity to discuss wellness and provide preventive services such as immunizations; this is important for parents whose compliance with medical care cannot be ensured—for these Members, consider incorporating well components with sick visits
- Document a complete history at the initial visit including birth history, and a well-rounded interim history
 - Examples include Member and parent concerns; feeding, elimination, sleep, and behavioral patterns since last visit;
 - Patient history should be documented at least once per calendar year
- Document a physical and mental development assessment such as “Development is appropriate for age,” or “Normal development”
- Document cognitive behaviors, communication skills, and physical abilities
 - These findings should be assessed at least once per calendar year
- Services may occur over multiple visits if all components are addressed within the specified timeframe
- Yearly physical examinations should include most, if not all, of the major body systems
- Health education/anticipatory guidance should be discussed and documented during visits (ex. bicycle, car, and water safety should be addressed at least once per calendar year)