

New for 2024

· No applicable changes to this measure



Definition

Percentage of members ages 3–17 who had an outpatient visit with a primary care provider or OB-GYN and had evidence of the following during the measurement year:

• Body mass index (BMI) percentile

Counseling for physical activity

· Counseling for nutrition

Plan(s) Affected	Quality Program(s) Affected	Collection and Reporting Method
Commercial	CMS Quality Rating System	Hybrid
 Exchange/Marketplace 	NCQA Accreditation	Claim/Encounter Data
Medicaid	NCQA Health Plan Ratings (BMI Percentile Only)	Medical Record Documentation

Codes

The following codes can be used to close HEDIS numerator gaps in care; they are not intended to be a directive of your billing practice.

BMI Percentile		
ICD-10 Diagnosis	Z68.51, Z68.52, Z68.53, Z68.54	
LOINC	59574-4, 59575-1, 59576-9	
Counseling for Nutrition		
CPT®/CPT II	97802, 97803, 97804	
HCPCS	G0270, G0271, G0447, S9449, S9452, S9470	

(Codes continued)



Codes

The following codes can be used to close HEDIS numerator gaps in care; they are not intended to be a directive of your billing practice.

Counseling for Nutrition

SNOMED

 $11816003, 61310001, 183059007, 183060002, 183061003, 183062005, 183063000, \\ 183065007, 183066008, 183067004, 183070000, 183071001, 226067002, 266724001, \\ 275919002, 281085002, 284352003, 305849009, 305850009, 305851008, 306163007, \\ 306164001, 306165000, 306626002, 306627006, 306628001, 313210009, 370847001, \\ 386464006, 404923009, 408910007, 410171007, 410177006, 410200000, 429095004, \\ 431482008, 443288003, 609104008, 698471002, 699827002, 699829004, 699830009, \\ 699849008, 700154005, 700258004, 705060005, 710881000, 1230141004, 14051000175103, \\ 428461000124101, 428691000124107, 441041000124100, 441201000124108, \\ 441231000124100, 441241000124105, 441251000124107, 441261000124109, 441271000124102, \\ 441321000124104, 441291000124101, 441301000124100, 441311000124101, 445291000124103, \\ 445301000124102, 445331000124105, 445641000124105$

Counseling for Physical Activity		
HCPCS	G0447, S9451	
SNOMED	103736005, 183073003, 281090004, 304507003, 304549008, 304558001, 310882002, 386291006, 386292004, 386463000, 390864007, 390893007, 398636004, 398752005, 408289007, 410200000, 410289001, 410335001, 429778002, 710849009, 435551000124105	

Required Exclusion(s)

Exclusion	Timeframe
 Members in hospice or using hospice services 	Any time during the measurement year
Members who died	
 Members with a diagnosis of pregnancy 	





Important Notes

- For ages 3-17, a BMI percentile or BMI percentile plotted on an age growth chart meets compliance. A BMI value will <u>not</u> meet compliance for this age range.
 - Always record height and weight in a member's medical record.
- BMI percentile ranges or thresholds will <u>not</u> meet compliance.
 - This is true even for single ranges for example,
 17–18 percent.
 - o The only exception are values <1% or >99%
- Weight assessment and counseling for nutrition and physical activity can be completed at any appointment – not just a well-child visit. However, services specific to an acute or chronic condition will not meet compliance for counseling for nutrition or physical activity.
 - For example: Member has exercise-induced asthma or decreased appetite because of flu symptoms

Medical Record Detail Including, But Not Limited to

- Growth Charts with percentile
- · History and physical
- Progress notes
- · Vitals sheet
- After visit summary



Tips and Best Practices to Help Close This Care Opportunity:

- Please check your Patient Care Opportunity Report (PCOR) or Practice Assist often to see members with open care opportunities. If you have questions, your UnitedHealthcare representative can help.
- A BMI percentile is not the same as a BMI value. If your
 electronic medical record (EMR) system documents a
 BMI value and does not translate it to a BMI percentile
 in ranges, please work with your IT department. It is
 required to have a documented BMI percentile in a
 singular value.
- For example: 18 percent instead of 17-18 percent
- Your EMR may include a plotted age growth chart for BMI percentile with the service date and a member's height and weight. Vital charts with this information will also close the gap.
- Documentation of BMI percentile and counseling for nutrition or physical activity can be done at any time during the measurement year and on separate visits.
- Including a checklist in a member's medical record is a good way to make sure all measure components are completed. For example:
 - A notation of "well nourished" during a physical exam will <u>not</u> meet compliance for nutritional counseling.
 However, a checklist indicating that "nutrition was addressed" will.
 - A notation of "cleared for gym class" or "health education" will <u>not</u> meet compliance for physical activity counseling. However, a checklist indicating "physical activity was addressed" or evidence of a sports physical will.
- Provide parents of children ages 4 and older with age appropriate handout(s) that include a section on physical activity outside of developmental milestones.
 For example:
 - Recommended guidelines for amount of activity per day or week.

- Discuss proper nutrition and promote physical activity with parents and members at every visit.
- Talk with parents and members about nutrition and physical activity for at least 15 minutes at each well-child visit.
- Be sure to document "MEAT" when counseling for obesity:
 - Manage the behavioral effects due to obesity.
 - Evaluate the behavioral effects of obesity.
 - Assess the level of obesity.
 - Treat obesity.
- If filing G0447 with a well-child visit, attach modifier 25 or 59 to the well-child procedure code so it's reviewed as a significant, separately identifiable procedure.
 - Modifier 25 is used to indicate a significant and separately identifiable evaluation and management (E/M) service by the same physician on the same day another procedure or service was performed.
 - Modifier 59 is used to indicate that 2 or more procedures were performed at the same visit, but to different sites on the body.
- BMI percentiles and evidence of counseling for nutrition and physical activity can be accepted as supplemental data, reducing the need for some chart review. Please contact your UnitedHealthcare representative to discuss clinical data exchange opportunities.

Counseling may include:

- Discussion of current nutrition behaviors (e.g., eating habits, dieting behaviors)
- · Checklist indicating nutrition was addressed
- Counseling or referral for nutrition education
- Member received educational materials on nutrition during a face-to-face visit
- · Anticipatory guidance for nutrition
- · Weight or obesity counseling