Purpose

To clarify providers’ role in quality-reporting requirements

- The Healthcare Effectiveness Data and Information Set (HEDIS) standardizes quality measures at the national level. It is regulated by the National Committee for Quality Assurance (NCQA).

- Fidelis Care has received full, three-year Health Plan Accreditation from the NCQA. The Accredited status applies to its Medicaid (HMO), Medicare Advantage/Dual Advantage (HMO/POS), and Qualified Health Plans (HMO) through the New York State of Health Marketplace. The NCQA Health Plan Accreditation shows members and providers that a health plan is well managed and delivers high quality care and service.

- The Quality Assurance Reporting Requirements (QARR) standardize quality measures at the State level. They are regulated by New York State Department of Health.

- Both HEDIS and QARR are used to measure Fidelis Care’s performance.
Targeted QARR Measures for This Toolkit

• Adolescent Well Care Visits
• Childhood Immunization Status
• Immunizations for Adolescents
• Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents
• Adolescent Preventive Care
• Other Children and Adolescent Measures, Including:
  • Chlamydia Screening
  • Asthma Medication Ratio
  • Annual Dental Visit
Adolescent Preventive Care Measures (ADL)

All adolescents should have at least one well care visit with a PCP or OB/GYN during the measurement year. The visit should cover:

1. Risks and preventive actions associated with sexual activity
2. Depression
3. Risks of tobacco usage
4. Risks of substance use (including alcohol)
Well Care Practices

• If you provide two separately identifiable services on the same day (a sick visit and well care visit), and both services are documented in the medical record, bill for both using modifier 25.

• Compliant well care medical records must document:
  1. Health and developmental history
  2. A physical exam
  3. Health education/anticipatory guidance.

Use standardized medical documentation forms, such as the American Academy of Pediatrics’ forms available at https://brightfutures.aap.org/materials-and-tools/tool-and-resource-kit

• All claims must include appropriate well care codes.

• Please note: A sports physical does not result in compliance.
## Childhood Immunization Status

The following immunizations should be administered on or before a patient’s second birthday.

<table>
<thead>
<tr>
<th>Immunization</th>
<th>Procedure Code</th>
<th>And/or</th>
<th>DX Code or CPTII Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DTaP</td>
<td>90698, 90700, 90723</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>IPV</td>
<td>90698, 90713, 90723</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>MMR</td>
<td>90707, 90710</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Haemophilus Influenza Type B</td>
<td>90644, 90647, 90648, 90698, 90748</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>90723, 90740, 90744, 90747, 90748, G0010, 3E0234Z, 99.55, or listed diagnosis</td>
<td>or</td>
<td>070.2xx, 070.3xx, V02.61, B16.0, B16.1, B16.2, B16.9, B17.0, B18.0, B19.10, B19.11, Z22.51</td>
</tr>
<tr>
<td>Varicella-zoster virus (VZV)</td>
<td>90710, 90716</td>
<td>or</td>
<td>052.x, 053.xx B01.0-B01.9, B02.0-B02.9</td>
</tr>
<tr>
<td>Pneumococcal conjugate (PCV)</td>
<td>90670, G0009</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Childhood Immunization Status Combination 3</th>
<th>DTaP</th>
<th>IPV</th>
<th>MMR</th>
<th>HiB</th>
<th>HepB</th>
<th>VZV</th>
<th>PCV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of vaccines required</td>
<td>4</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>4</td>
</tr>
</tbody>
</table>
Immunizations for Adolescents

This measure requires the DTaP, meningococcal, and 2 doses of the HPV vaccines to be administered on or before a patient’s 13th birthday.

Fidelis Care reaches out to members to encourage them to complete the full course of each vaccine. We encourage providers to take similar steps.

The following resources are available for providers distributing Gardasil:

- Contact the Merck National Service Center at 1-800-672-6372 to receive appointment reminder cards and stickers. The cards are available in English and Spanish.

- Link for patients to sign up to receive reminders for their second and third doses: www.gardasil.com/why-3-doses/dosage-reminders-gardasil/

- Vaccination reminder cards for upcoming and missed vaccinations: www.merckvaccines.com/VaccinationReminderCards/Pages/home.
Immunizations for Adolescents

Adolescents who turn 13 years old before the end of the measurement year must receive:

• One (1) – meningococcal conjugate vaccine between their 11th and 13th birthdays.

• One (1) – diphtheria, tetanus, and pertussis (DTaP) vaccine between their 10th and 13th birthdays.

• Two (2) – human papillomavirus (HPV) vaccines between their 9th and 13th birthdays.

(There must be at least 146 days between the first and second dose of the HPV vaccine)

<table>
<thead>
<tr>
<th>Immunization</th>
<th>Procedure Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meningococcal conjugate</td>
<td>90734</td>
</tr>
<tr>
<td>DTaP/TD</td>
<td>90715</td>
</tr>
<tr>
<td>HPV – 2 injections</td>
<td>90649, 90650, and 90651</td>
</tr>
</tbody>
</table>
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents

• Ages 3-17.
• Outpatient visit with a PCP or OB/GYN.
• Evidence of BMI percentile documentation, nutrition counseling, and counseling for physical activity during the measurement year.
  • BMI percentile, or BMI percentile plotted on age-growth chart.
  • Nutrition:
    Documentation must include a note indicating the date and one of the following:
    • Discussion of current nutrition behaviors (e.g., eating habits, dieting behaviors)
    • Checklist indicating nutrition was addressed
    • Counseling or referral for nutrition education
    • Patient received educational materials on nutrition
    • Anticipatory guidance for nutrition
    • Weight or obesity counseling

• Physical Activity:
  Documentation must include a note indicating the date and one of the following:
  • Discussion of current physical activity behaviors (e.g., exercise routine, participation in sports, exam for sports participation)
  • Checklist indicating physical activity was addressed
  • Counseling or referral for physical activity
  • Member received educational materials on physical activity
  • Anticipatory guidance for physical activity
  • Weight or obesity counseling
Body Mass Index

- Because BMI norms for youth vary with age and gender, this evaluates whether the provider assesses a BMI percentile rather than an absolute BMI value.

More providers resources for BMI assessments are available at brightfutures.aap.org/materials-and-tools/tool-and-resource-kit

Steps to Calculate, Plot, and Interpret BMI for Children and Adolescents

1: Measure height and weight accurately.

2: Calculate BMI:
   Metric: BMI = (weight in kilograms) / (height in meters) x (height in meters)
   English: BMI = (weight in pounds x 703) / (height in inches) x (height in inches)

3: Select the BMI-for-age chart appropriate for child’s gender:
   Boys: www.cdc.gov/growthcharts/data/set1clinical/cj41l023.pdf
   Girls: www.cdc.gov/growthcharts/data/set1clinical/cj41l024.pdf

4: Plot the BMI value at the intersect with the child’s age.

5: Identify the percentile line closest to point plotted.

6: Interpret the plotted measurements. (While rate of change in BMI as a specific risk indicator has not been well defined, an annual increase of 3 or more BMI units may reflect rapid increase in body fat that warrants further evaluation.)

7: Consider further assessment to confirm diagnosis of overweight, identify underlying causes of overweight, and guide management plan.

Note: BMI-for-age is a screening tool. Clinical judgment must be applied to determine the need for further assessment. Growth patterns outside normal range should always prompt rechecking of measurements. Children and adolescents determined to be overweight should undergo in-depth assessment for underlying causes and guide management plans.
Appropriate Remedies for Cold and Flu

✓ Plenty of rest
✓ Lots of fluids
✓ Non-prescription nasal sprays for nasal congestion
✓ Over-the-counter children’s-strength cold and/or flu medication
✓ AT LEAST 24 hours of rest at home after a fever breaks

AVOID:
- Aspirin for children under 18
- Antibiotics in the absence of a diagnosed bacterial infection

(Why shouldn’t you use antibiotics to treat the flu? Antibiotics do not fight infections caused by viruses like the flu, colds, most sore throats and bronchitis, and some ear infections. Unneeded antibiotics may lead to future antibiotic-resistant infections.)
Chlamydia Screening

Females ages 16-24 who have been identified as sexually active must be tested for chlamydia. Fidelis Care encourages providers to routinely perform urine analysis to screen for chlamydia, as this STI is curable but can lead to infertility if left untreated.

Some patients may not want to share details regarding their sexual activity with their PCP. Even if a patient does not identify as sexually active, she should receive a urine test for chlamydia, particularly if she is identified as non-compliant for the measure.

Providers should always test a female patient for chlamydia if:

- She has recently had a pregnancy test, or
- She has recently been given prescription contraceptives.

If your office is not billing for, or is unable to bill for this service, ensure that supplemental data is provided for members appearing on the Non-Compliant Report.
Asthma Medication Ratio

- Members ages 5-64, as of December 31 of the measurement year, who were identified as having persistent asthma and were dispensed appropriate controller medications that they remained on for at least 50 percent of their treatment period.

- If a patient sees a PCP after suffering from an asthma attack:
  - Complete an asthma action plan
  - Evaluate whether they should be prescribed an asthma controller medication
Annual Dental Care

• Everyone age 1 and older should visit the dentist at least once a year to help keep teeth and gums healthy.
• Routine dental visits help develop lifelong healthy habits in young children.
• Parents can brush children’s teeth and begin to teach good habits, including flossing, until children can brush and floss on their own.
• For a child’s annual dental visit, you can refer your patient to a dentist participating in the Fidelis Care network. Find a network dentist at [www.fideliscare.org/FindADoctor/#/search](http://www.fideliscare.org/FindADoctor/#/search) or by calling 1-888-FIDELIS (1-888-343-3547).
Discussion

- Which tools can your practice use?
- If new tools can be provided, in what time frame would they be most useful to your practice?
- How else we can help?
For more information,
call 1-888-FIDELIS (1-888-343-3547)
or visit fideliscare.org