HEDIS MEASURE OVERVIEW

Child and Adolescent Well-Care Visits (WCV)

Please note that the information offered in this flyer is based on Healthcare Effectiveness Data and Information Set (HEDIS®) technical specifications. It is not meant to replace your clinical judgment.

Child and Adolescent Well-Care Visits (WCV) is one of the National Committee for Quality Assurance (NCQA) HEDIS measures used to evaluate the care and services provided to patients. The measure is designed to ensure adequate care for children and adolescents, including screening and counseling for social, emotional and physical conditions during this critical time.[1]

Who is included in the WCV measure?

Patients 3–21 years of age by Dec. 31 of the measurement year

Service(s) needed for measure compliance

A comprehensive well-care visit with a primary care provider (PCP) or obstetrician-gynecologist (OB-GYN). The practitioner does not have to be assigned to the patient. Telehealth visits are not compliant.

Well-care visits may be conducted during a sick visit if, as the documentation not only addresses the intent of the visit but also the preventive services with all the required components documented.

The following components should be included and documented in a well-child visit:

- Physical exam, including body mass index (BMI)
- Health and development history – physical and mental
- Health education and anticipatory guidance – including nutrition and physical activity
- Appropriate immunizations according to age and health history
- Dental, vision and hearing screening when required and include referral and follow-up, as appropriate
- Perform age-appropriate depression, alcohol and substance use screening annually
  - Document the instrument and screening result accordingly in patient's medical record
- Referral and follow-up as appropriate

1. National Committee for Quality Assurance. (2025). *HEDIS Measurement Year 2025: Volume 1: Narrative.*

Exclusions

- Patients using hospice services
- Patients who died anytime during the measurement year

Measure best practices

- Ensure clearinghouses and/or third-party billing contractors include all codes, regardless of reimbursement.
- Educate the parent/guardian or patient on the importance of well-care visits.
- Offer block scheduling for families with multiple children who need a well-care visit.
- Ensure accurate patient contact information is on file.
- Use a standardized template during the visit to capture all required elements.

WCV coding

Code type	Codes	Description
International Classification of Diseases, Tenth Revision (ICD-10)	Z00.00, Z00.01, Z00.121, Z00.129, Z00.2, Z00.3, Z01.411, Z01.419, Z02.5, Z02.84, Z76.1, Z76.2	Encounter for well care
Current Procedural Terminology (CPT®)	99381–99385, 99392–99395	New and established patient preventive medicine services
Healthcare Common Procedure Coding System (HCPCS)	G0438, G0439, S0302, S0610, S0612, S0613	Annual Wellness Visits; Early and Periodic Screening, Diagnostic and Treatment (EPSDT) screening to be billed with evaluation and management (E/M) CPT code; annual gynecological exam

Coding included above is based on the NCQA Value Set, but each state's fee schedule determines which codes are reimbursed. Please consult your respective state's fee schedule for reimbursement information.

Information regarding inclusion, compliance and exclusions for this measure were sourced from the HEDIS Measurement Year 2026 Volume 2: Technical Specifications for Health Plans report. The coding information in this document is subject to changing requirements and should not be relied on as official coding or legal advice. All coding should be considered on a case-by-case basis and supported by medical necessity and appropriate documentation in the medical record.

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