Oregon SBHC Key Performance Measures Guidance Document Core Measure 2: Comprehensive Health Assessment (Effective 7/1/2022)



Measure Description

The percentage of SBHC clients ages 5-21 with evidence of a completed comprehensive health assessment during the measurement school year

Eligible Population

All SBHC clients seen for any reason (including physical, mental, dental health visits) in-person or telehealth during the measurement school year (July 1 – June 30) ages 5-21 at the time of their visit.

Exclusions

SBHC clients are excluded from Comprehensive Health Assessment denominator if:

- Client of any age refuses comprehensive health assessment; OR
- Parent consent for health assessment is unable to be obtained after one attempt for client under 15 years of age; OR
- Clients with two documented no-shows for a scheduled appointment when a KPM service was to be provided.

Measure Specifications

| Denominator: | Eligible population |
|------------------------------|--|
| Numerator: | Unique counts of members age 5-21 during the measurement school year (July 1 – |
| | June 30) who received a comprehensive health assessment |
| Codes: | ICD-10-CM Diagnosis: Z13.9, Z13.4 |
| | CPT: 96160 |
| | HCPCS: T1001, TX095 |
| | OR Evidence of documented health assessment in chart |
| State Benchmark: | 70% of charts sampled with a documented comprehensive health assessment |
| | during the measurement school year |
| Chart Audit Requirements: | SBHCs should audit 20% of their charts of the eligible population, with a floor of |
| | 30 charts and a ceiling of 50. If the SBHC has fewer than 30 eligible charts, they |
| | should review all eligible charts. |

What "counts" as a health assessment?

The comprehensive health assessment KPM may be based on administrative (billing) data. To use the billing codes listed above, at least one of the following components must be present to count as a comprehensive health assessment:

- Completion of a health assessment tool (may be embedded in other clinic forms)
- Documented assessment of health risks and strengths, including:
 - Physical growth and development
 - Oral health
 - Social and academic competence
 - Emotional well-being
 - Risk reduction

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Violence and injury prevention

FAQ

Does the Health Assessment need to be completed at the same time as the comprehensive well care visit and physical exam?

No. We understand that the health assessment may be conducted over multiple visits, rather than within the context of a single well visit.

Resources

Fernald FH, et al. 2013. Health Assessments in Primary Care: A How-to Guide for Clinicians and Staff. Rockville, MD: Agency for Healthcare Research and Quality. Available at: https://www.ahrq.gov/ncepcr/tools/assessments/index.html

Hagan JF, Shaw JS, Duncan PM, eds. 2017. "Adolescence." Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents, Fourth Edition. Elk Grove Village, IL: American Academy of Pediatrics. Available at: https://brightfutures.aap.org

Klein DA, Paradise SL, Landis CA. 2020. Screening and Counseling Adolescents and Young Adults. American Family Physician Feb1;101(3):147-158. Available at: https://www.aafp.org/afp/2020/0201/p147.html

Rapid Assessment for Adolescent Preventive Services (RAAPS). 2014. Available at: https://possibilitiesforchange.org/raaps/

Reuland, C, Gillespie, RJ, Case, K. 2014. Enhancing Adolescent Well-Visits: Getting Them In, Setting the Stage, and Implementing Strength & Risk Screening Tools. Portland, OR: Patient Centered Primary Care Institute. Available at: https://www.q-corp.org/resources/webinars/enhancing-adolescent-well-visits

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